







County Borough of Smethwick.

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# ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR

1929.

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HUGH PAUL, M.D., D.P.H.

Medical Officer of Health, Tuberculosis Officer,  
School Medical Officer, & Medical Superintendent  
of Joint Isolation Hospital and Sanatorium.



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# County Borough of Smethwick.

## Committees—1928-1929.

### HEALTH COMMITTEE.

ALDERMAN G. BOWDEN, J.P.	ALDERMAN MRS. E. M. SANDS, J.P.
THE MAYOR	COUNCILLOR W. C. BLAKE.
(ALDERMAN A. MORRIS, J.P.	COUNCILLOR E. T. BROWN.
COUNCILLOR R. T. BAILLIE, M.B.	COUNCILLOR E. H. CHARNOCK.
COUNCILLOR F. W. PERRY.	COUNCILLOR MRS. N. M. CHESNEY.
	COUNCILLOR E. GWYNNE.

### MATERNITY AND CHILD WELFARE COMMITTEE.

The Members of the Health Committee together with the following Co-opted Members:—

MRS. E. T. BROWN.	MRS. A. GOODWIN.
MRS. J. DARBY.	MRS. S. LUSTY.
MRS. A. E. HARRISON.	

### SMETHWICK AND OLDBURY JOINT HOSPITAL COMMITTEE.

*Chairman:* COUNCILLOR W. J. COOPER.

ALDERMAN G. F. BETTS, J.P.	COUNCILLOR E. T. BROWN.
THE MAYOR	COUNCILLOR E. GWYNNE.
(ALDERMAN A. MORRIS, J.P.	COUNCILLOR T. FRALEY.
ALDERMAN G. BOWDEN, J.P.	COUNCILLOR P. R. PRITCHARD.
ALDERMAN MRS. E. M. SANDS, J.P.	COUNCILLOR T. C. MCKENZIE, M.B.

#### *Oldbury Representatives:*

COUNCILLOR MRS. A. B. LENNARD,	COUNCILLOR H. H. ROBBINS.
COUNCILLOR R. M. HADLEY, J.P.	

### SMETHWICK REPRESENTATIVES ON THE SOUTH STAFFORDSHIRE JOINT SMALL POX HOSPITAL BOARD.

ALDERMAN G. F. BETTS, J.P.	ALDERMAN G. BOWDEN, J.P.
COUNCILLOR P. R. PRITCHARD.	

#### OBITUARY.

ALDERMAN G. BOWDEN, J.P.  
Died, 20th November, 1929.

## HEALTH DEPARTMENT STAFF.

*Medical Officer of Health, Tuberculosis Officer, School Medical Officer, and Medical Superintendent of Isolation Hospital :*

HUGH PAUL, M.D., B.Ch., B.A.O., D.P.H.

*Senior Assistant Medical Officer :*

A. G. M. SEVERN, M.A., M.D., D.P.H. (to 22nd April, 1929).

CHARLES COOKSON, M.D., Ch.B.; D.P.H. (from 22nd April, 1929).

*Assistant Medical Officers.*

MARGARET E. McLAREN, M.B., Ch.B., D.P.H.

EDITH M. AINSCOW, M.B., Ch.B., D.P.H.

EILEEN C. TRIMBLE, M.B., Ch.B. (Part-time Officer from 21st November, 1929).

*Chief Sanitary Inspector.*

†\*JOHN H. WRIGHT.

*Sanitary Inspectors :*

†\*JAMES F. ROGERS.

†\*WM. E. SHAW.

\*HERBERT A. RICHARDSON.

*Clerical Staff :*

*Chief Clerk and Statistician :—*\*GEORGE H. ROE.

*Clerks :* MISS IDA SALTER.

MISS F. HOWLETT.

A. H. CORNHILL.

S. SADLER.

*Junior Clerk :* E. BAYLEY.

*Nursing Staff :*

MISS L. E. ROBERTS.

§†MISS J. E. ACKERS.

§ MISS A. WRIGHT.

§ MISS J. P. BATES.

§\*MISS F. RICHARDS.

§†MISS E. E. GLASCODINE (to 31.8.29).

§ MISS F. M. SULLIVAN.

§†MISS M. EVANS (from 17.9.29).

||†§\*MISS L. WEALE (to 13.3.29).

§†MISS G. W. HAYNES (from 17.9.29).

§ MISS E. COLLINS.

§†MISS A. GARNER (from 1.11.29).

The work of these nurses is divided between the following Committees :—  
Health, Maternity and Child Welfare, Tuberculosis, Education and Mental Deficiency.

*Matron of Isolation Hospital :* MISS F. E. WHITEHOUSE.

*Public Analyst :* JOSEPH LONES, F.I.C., F.C.S.

\*Sanitary Inspectors' Certificate of Royal Sanitary Institute.

†Meat and Foods Inspectors' Certificate of Royal Sanitary Institute.

‡Health Visitors' Certificate of Royal Sanitary Institute.

||Maternity and Child Welfare Certificate of Royal Sanitary Institute.

§Certificate of the Central Midwives Board.



## *County Borough of Smethwick.*

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Public Health Department,  
 "The Uplands,"  
 Hales Lane,  
 Smethwick.

July, 1930.

MR. MAYOR, LADIES AND GENTLEMEN,

I beg to submit my Annual Report as Medical Officer of Health and Tuberculosis Officer for the year 1929.

The year under review was chiefly noteworthy from a health point of view for the disastrous epidemic of influenza, which occurred during the first four months, an epidemic which swept the whole country, and indeed, the whole world.

The epidemic seems to have originated in the United States of America, towards the end of November, 1928. It commenced as a mild form in the western states and cities and spread across to the eastern coast, reaching its zenith in December, and commencing to decline in January. In Canada the same course was followed. On the Continent of Europe, influenza of a mild type appeared in Germany in December, and the incidence in Berlin increased up to about the end of the second week in January; in February and March, however, the disease became more fatal. Epidemics occurred during January in most of the western European countries.

In the British Isles the disease became prevalent first in Scotland and Ireland, especially Glasgow and Belfast. The epidemic in Belfast was fairly mild in type although very widespread, but the Glasgow epidemic was both severe and widespread. In England and Wales the deaths from influenza and pneumonia were fairly normal for the first few weeks of the year, but in February the disease began to attain epidemic proportions. The ports of the north were first attacked, and to a less extent the ports of the south, suggesting the paths by which the epidemic was travelling; by mid-February the northern counties were suffering severely.

The Midlands were the last part of the country to be attacked, but yielded their full toll of lives. During March the epidemic was dying down in other parts of the country, but reached its zenith in the Midlands. The height of the epidemic coincided with the cold snap, and both acted together to increase the mortality.

Smethwick, in common with the other great towns of the country, was badly hit, and the death rate reached a maximum of 37.2 per 1,000 in the week

ending March 9th. This represented 61 deaths. From this date the epidemic gradually subsided and became normal about the beginning of April.

An analysis of the deaths during this period, shows that the epidemic differed from that of 1918-9, in that last year's epidemic was most fatal at the extremes of life, whereas during 1918-9 the age group 25-45 was most severely affected; that is, in 1918-19 the disease attacked the prime of manhood and womanhood, whereas in 1929 it was most fatal to old people. In Smethwick, during the worst week, only fourteen out of sixty-one deaths were between five and fifty years, and no less than twenty-three were over 65 years of age. The infantile mortality for the first quarter of the year increased from 58 in 1928 to 113 in 1929.

The result of the influenza epidemic was to increase the death rates and infantile mortality rates; the former was 13.4 per 1,000, as against 9.7, an increase of 38 per cent., the highest figure since 1918; the latter was 79.8, as against 61.6, an increase of 30 per cent. Leaving out the first quarter of the year, the death rate for the remaining three quarters, was slightly higher than for 1928, and the infantile mortality rate was appreciably lower. This can be considered very satisfactory, as the general death-rate and the infantile death-rate in 1928, were the lowest on record in the Borough. The decline in the birth-rate was arrested in 1929, the figure being 17.8 per 1,000, as against 16.7 for 1928, and 17.0 for 1927.

The incidence of other infectious diseases than influenza was also high. The number of cases of scarlet fever notified was almost doubled, and the facilities for isolating them at the hospital were severely strained, in spite of the fact that mild cases were only admitted when the home conditions were such that efficient isolation could not be secured outside the hospital. Fortunately the disease was of a mild type and for the second year in succession no deaths occurred.

Diphtheria was also slightly more prevalent, but the death-rate continued low. As in 1928, two deaths occurred during the year.

Measles and whooping cough were epidemic all though the year, and the number of deaths from these diseases was higher than for many years. Twenty-five persons died from measles, as against two in 1928, and twenty in 1927, and seventeen persons died from whooping cough, as against ten the preceding year. Many of these deaths, especially those from measles, could undoubtedly have been prevented if only parents would realise that measles and whooping cough are *not* minor maladies, but very dangerous diseases. They have been responsible for more than four times the number of deaths from scarlet fever and diphtheria during the past five years.

For many years past it has been increasingly obvious that measles, and to a lesser extent whooping cough, are dangerous and deadly diseases, and that institutional provision is urgently needed. It is, to my mind, much more important to treat measles in hospital than scarlet fever, although institutional treatment will not do a great deal to reduce the actual incidence; what it will do, however, in the case of measles, is to save more lives. At present the type of scarlet fever case which we take into hospital is either the severe case which needs skilled treatment, or the mild case in which proper isolation cannot be secured at home, and in which there are young children in the family, or where one or other of the inmates works in a food shop, grocery, laundry,

etc., where the disease might easily be spread. Cases of diphtheria, on the other hand, should always be treated in hospital owing to the powerfully selective action of the toxin of the disease on the heart, and the need, therefore, for skilled nursing.

As regards measles, this disease is most infectious during the first day or two, and those exposed to infection are usually infected before the rash is out or the disease diagnosed. Hospital provision, therefore, will do little to reduce the actual incidence of the disease, and mild cases should not be sent to hospital unless there are other circumstances which render this desirable. Such circumstances would be bad home conditions, lack of nursing facilities or food, careless parents, or debility of the patient. Severe cases, however, should be sent to hospital, because of the danger of death from complications—a danger by no means remote.

The necessity of providing special provision for such diseases in the infectious diseases hospital becomes more acute now that the duties of providing institutional relief for cases requiring it devolves on the Council as from April 1st, 1930.

The whole question of institutional accommodation for all types of infectious diseases is one which should receive the early consideration of the Council, and extensions to the Hospital at Holly Lane are now urgently required.

#### MATERNITY AND CHILD WELFARE.

The Council's scheme for Maternity and Child Welfare has been extended during the year by the opening of two new Infant Welfare Centres, the provision of an additional ante-natal session, making four weekly, and the institution of a scheme for examining "toddlers" at the age of four as a routine. A scheme was also inaugurated by which expectant mothers could, by the payment of a fee of 5s. before the seventh month of pregnancy insure themselves against possibly having to pay for the services of a doctor, should it be necessary for the midwife to call one in emergency at the time of confinement. The effect of this has been, in my opinion, to secure to the mother a better standard of midwifery, and as such is a move in the right direction. It is not expected that the scheme will be a success from an actuarial point of view.

The routine examination of "toddlers" at the age of four years has revealed that a very considerable amount of good can be done by such examinations, and that a large proportion of these children suffer from minor ailments, which can be easily cured. The results should be to send to the schools better and healthier children.

The first of the two new Infant Welfare Clinics to be opened in 1929, is situated at St. Chad's Church Hall in Shireland Road, in the middle of a populous district, and is the first of our Welfare Clinics to be opened for a morning session. While the attendances are satisfactory, the experiment seems to show that there is little doubt that the afternoon clinics are more popular with the mothers than morning clinics.

The other Infant Welfare Clinic was started at St. Mark's, Londonderry, and is an afternoon session. It is situated in the centre of the new housing

estate, and appears to be one of the most suitable of all our sites. I have every confidence that the attendances there will rapidly increase, and that it will soon be one of our best attended centres.

During the year dental treatment was provided for expectant mothers and for "toddlers," on the recommendation of the Medical Officer of the Ante-Natal, or Infant Welfare Clinic, and this was made use of to a considerable extent. There were 219 attendances on the part of "toddlers" for dental treatment, but only 14 mothers were treated during the year. This is a branch of work which may be expected to develop considerably during the next year or two. At present dentures are not provided for mothers, and the question of such provision has not yet been considered by the Council.

#### MIDWIVES.

The standard of midwifery which is available for the average working class mother in Smethwick is far from satisfactory. Under the artificial conditions of modern civilisation, the bringing of a baby into the world is no longer a simple physiological action, but is in reality much more dangerous than a major surgical operation, and much more deadly. It is a reproach to our civilisation that such should be the case; that in 1930, the maternal mortality rate is actually higher than in 1929, and that no material reduction has been made in this rate for a quarter of a century. Nor is this the whole story. For every maternal death, there must be many cases of chronic ill-health in mothers who have escaped with their lives, but who have only partially recovered.

There are many factors which are responsible for this state of affairs, and it does not seem that under present conditions they can all be remedied. But there are several conditions which are at least partially responsible, and call loudly for correction. We know that a certain amount of the disability of the expectant mother is often due to a malformed pelvis, due to rickets in infancy or childhood. This is now being prevented at Infant Welfare Clinics and elsewhere, and gross deformity due to rickets is now rare; but it will be many years before these infants and children come into the child-bearing group, and this work will only show its results in the next generation. One of the most important weapons we possess to combat mortality and morbidity in child-birth is ante-natal examination and care, and even in the case of mothers who are physically unsuited for bearing a child, much can be done to make the act of parturition safe for both mother and child. This is work which has been carried out intensively in Smethwick during the past few years, and it is found that the maternal mortality for last year among women who attended the Ante-natal Clinics was only one-third of the mortality of those who did not attend. I am satisfied that the morbidity rate, if it could be calculated, would also show even more striking figures.

A third factor, and a very important one, is the standard of midwifery available, and it appears to me that this can only be obtained by making the financial returns sufficient to attract the right type of woman to train as a midwife and to encourage her to strive after a higher standard of professional skill. Under present conditions, even a successful midwife in an industrial area like Smethwick, with 100 or more cases in the year, can only hope to obtain about £150 per annum—or even less, as many of them have



bad debts. Such an income will not attract the type of professional woman we require for a task as important and as dangerous (to the patient) as a major surgical operation ; it cannot command the high degree of skill and training which are absolutely essential. To my mind, the present period of training for a midwife is too short, and the degree of skill necessary to pass the C.M.B. examination is too low, and both ought to be increased. But an increase in the requirements of the Central Midwives Board, and a higher training without increased attractions from a financial point of view, will only result in a severe shortage of midwives. The better type of woman will not be attracted financially, and the poorer type will be unable to satisfy the Board. This situation cannot be met merely by advising the midwives to raise their fees ; these are already as much as the mother can afford to pay in the majority of cases ; it can only be met by State or Municipal help, either by a midwifery benefit, including midwife's services and the service of a doctor when necessary, or by the provision of municipal midwives.

This is a problem which has received considerable attention within the past year or two ; it is one which will have to be tackled before we get the maternal mortality and maternal morbidity to the figures which obtain, for example, in Scandinavia, where midwives are highly trained and maternal mortality is very low.

#### PROPOGANDA.

During the year a considerable amount of attention was given to the question of Health Propoganda, and a number of lectures was given by members of the Staff.

As stated in previous Reports, I am fully convinced that if Health Propoganda is to fulfil any useful purpose, it must be continuous, must be educational, and must not be sensational. One can no more educate children by a short series of public lectures crowded into one week, than one can educate adults in matters of healthy living by the same method. Human memory is very short and facts picked up at public meetings are soon forgotten. The facts must be constantly reiterated and driven home, and to do this one must deal with the individual. In the schools, the education is individual and continuous ; in health matters, if success is desired, it must be individual and continuous. The ideal form of health education seems to me to consist of a series of talks to small audiences. They may consist of talks to mothers at the Welfare Clinics, talks to children at the Schools, talks to fathers at Evening Clinics, etc., but the audiences should be sufficiently small to enable the listener to take a personal interest and to ask questions.

Following these lines, the nurses give a series of talks, lasting about ten or fifteen minutes, throughout the year at the Welfare Centres. These talks mainly concern the welfare of the baby and a definite syllabus is followed and the same talks are given each month at all the Centres. The subject on which these talks will be given is published monthly in "Better Health." Talks to school children at the Secondary Schools on dental matters have been given by Miss Hilda Sherry, L.D.S., the Senior School Dentist. A series of talks to fathers was started in September, and was carried on throughout the winter. The success of this series was much greater than was expected, and the attendances were maintained to the last lecture, in spite of the fact that the lectures were not advertised. A definite syllabus was drawn up and

followed, and the lectures were given by the male staff of the department. At the special request of the fathers, the classes were continued for six weeks longer than had originally been arranged. Next winter it is proposed to continue these classes, and extend them to include a wider syllabus and more lectures.

In addition to the talks outlined above, the periodical "Better Health" was published monthly, and reached a wider circle than could otherwise be touched. It is a Journal devoted solely to health propoganda, and the various articles are written by experts in each particular branch; it is distributed free at the Welfare Centres, Health Office, the various Clinics, etc. The circulation is 2,000 per month, and we have evidence that it is really widely read, and that the supply is unequal to the demand.

In conclusion, I would like to thank the Health and Hospital Committees for their sympathetic support and for the very keen and lively interest which they have always displayed in matters affecting the Public Health. It is a pleasure to work for a Council which is not only willing but anxious to consider any scheme calculated to further the general health of the community, and to take endless pains to ensure that the standard of the services which they offer, shall be of the highest.

My thanks are also due to the Press, and to the "Telephone" in particular, for the generous way in which they have co-operated with us in the matter of health propoganda; to my colleagues of other departments, for their co-operation, and to my own staff, for their loyal and devoted service, and for their team spirit.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

HUGH PAUL, M.D., D.P.H.,

*Medical Officer of Health.*

COST OF PUBLIC HEALTH SERVICES FOR THE YEAR ENDED  
31st MARCH, 1930.

	Amount. £	Rate in £ d.
Infectious Diseases :		
Notification .. .. .	70	.04
Prevention .. .. .	747	.44
Smethwick and Oldbury Joint Hospital	3313	1.96
South Staffs. Joint Smallpox Hospital ..	76	.05
Maternity and Child Welfare .. ..	2049	1.21
Venereal Diseases .. .. .	89	.05
Tuberculosis .. .. .	3363	1.99
Mental Deficiency .. .. .	1560	.92
Food and Drugs Act .. .. .	299	.18
Smoke Investigation .. .. .	3	—
Fertilizers and Feeding Stuffs Act ..	12	.01
Blind Persons Act .. .. .	750	.45
Staffs. Mental Hospital Board .. ..	1896	1.12
Midwives Act, 1902 .. .. .	23	.01
Medical Inspection of School Children ..	2100	1.24
Salaries (not otherwise charged) ..	2505	1.48
National Insurance Contributions ..	35	.02
Superannuation Contributions .. ..	141	.09
Establishment Charges .. .. .	400	.24
	<hr/> £19,431 <hr/>	<hr/> 11.50 <hr/>

The above figures represent estimated Net Expenditure for the year ended 31st March, 1930.

# Annual Report, 1929.

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## GENERAL STATISTICS.

AREA : 2,500 acres.

POPULATION : Census 1921—75,757.

Estimate Mid-year, 1929—85,120.

NUMBER OF INHABITED HOUSES : 1921—15,895.

1929—20,065.

NUMBER OF FAMILIES OR SEPARATE OCCUPIERS : 1921—16,366.

RATEABLE VALUE : £364,027.

SUM REPRESENTED BY A PENNY RATE : £1,690.

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## EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1929.

			Totals.	Males.	Females.
BIRTHS : Legitimate	..	..	1,484	762	722
Illegitimate	..	..	32	20	12
			<hr/> 1,516	<hr/> 782	<hr/> 734

BIRTH-RATE : 17.8 per 1,000 of the population.

DEATHS : Total 1,144. Males, 607. Females, 537.

DEATH-RATE : 13.4 per 1,000 of the population.

DEATHS OF INFANTS UNDER ONE YEAR OF AGE : Total, 121. Males, 69. Females, 52.

INFANT MORTALITY RATE PER 1,000 BIRTHS : Total, 79.8, Legitimate, 78.1, Illegitimate, 156.2.

### DEATHS FROM :—

				Number.	Rate per 1,000 of Population.
Enteric Fever	..	..	..	2	0.02
Measles	..	..	..	25	0.29
Whooping Cough	..	..	..	17	0.20
Diarrhœa and Enteritis (under 2 years)				14	0.16
Diphtheria	..	..	..	2	0.02
Scarlet Fever	..	..	..	—	—
Influenza	..	..	..	77	0.90
Cancer	..	..	..	105	1.23
Respiratory Diseases	..	..	..	220	2.58
Pulmonary Tuberculosis	..	..	..	81	0.95
Other forms of Tuberculosis	..	..	..	11	0.12



# BIRTH-RATE, DEATH-RATE, AND ANALYSIS OF MORTALITY DURING THE YEAR 1929.

	BIRTH-RATE PER 1,000 TOTAL POPULATION		ANNUAL DEATH-RATE PER 1,000 POPULATION.										RATE PER 1000 BIRTHS		PERCENTAGE OF TOTAL DEATHS.			
	Live Births	Still- births	All Causes	Enteric Fever	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under 2 yrs.)	Total Deaths under 1 year	Certified by Regs. Med. Practitioners.	Inquest Cases.	Certified by Coroner after P.M. No Inquest.	Uncertified Causes of Death.	
England and Wales ..	16.3	0.68	13.4	0.01	0.00	0.08	0.02	0.15	0.08	0.74	0.55	8.1	74	91.5	6.1	1.5	0.9	
County Boroughs and Great Towns, including London ..	16.6	0.69	13.7	0.01	0.00	0.12	0.02	0.19	0.09	0.76	0.50	10.9	79	91.8	5.8	1.9	0.5	
Smaller Towns (1921 adjusted Populations, 10,000-50,000) ..	16.0	0.71	12.3	0.01	0.00	0.06	0.02	0.15	0.07	0.71	0.45	5.9	69	92.6	5.4	1.0	1.0	
London ..	15.7	0.53	13.8	0.01	0.00	0.04	0.02	0.26	0.08	0.69	0.56	10.7	70	89.5	6.8	3.7	0.0	
SMETHWICK ..	17.8	0.50	13.4	0.02	—	0.29	—	0.20	0.02	0.90	0.65	9.2	79	91.9	6.3	1.5	0.3	

The total deaths registered in Smethwick numbered 767; 15 of these were non-residents and were transferred to other districts, while 392 Smethwick residents died in other districts, and have been added to the number registered in the Borough. The nett deaths thus number 1,144, giving a rate of 13.4 per 1,000 of the population. Deaths under 5 years of age represent 17.1 per cent. of the total, against 14.2 per cent. last year, while deaths over 65 years of age represent 36.9 per cent. of the total, compared with 39 per cent. last year. The mean age at death was 48.0, compared with 50.0 last year, 46.7 in 1927, 46.4 in 1926, 45.8 in 1925, 43.8 in 1924, and 43.6 in 1923.

The decline in the birth-rate was arrested in 1929, the figure being 17.8 per 1,000 of the population, as against 16.7 for 1928 and 17.0 for 1927. Twenty-five years ago the rate was 30.3 per 1,000.

The Infant Mortality rate for the year was 79.8 per 1,000 births. This compares with 74 for England and Wales, and 79 for the 107 great towns. Forty-five per cent. of the infant deaths occurred during the first four weeks of life (neo-natal deaths).

A table showing the cause of death at different age periods will be found in the Appendix to this Report, and a similar table relating to the deaths of infants under one year, appears on page 39.

## COMPARISON OF RATES IN THE VARIOUS WARDS.

Ward.	Estimated Population.	Total Acreage.	Density.	Infant Mortality-rate	Resp. Diseases Death-rate.	General. Death-rate
Spon Lane. . .	13,596	515	26.4	71.8	2.5	12.9
Sandwell . .	9,799	411	23.8	85.6	2.3	16.6
Uplands . .	8,957	255	35.1	63.2	2.3	12.7
Bearwood . .	9,759	190	51.3	34.2	2.4	13.0
Cape . .	11,224	158	71.0	103.2	2.5	11.5
Victoria . .	10,243	176	58.1	111.4	3.3	15.2
Soho . .	9,747	224	43.5	99.4	3.1	17.0
Warley . .	11,795	571	20.6	67.1	2.0	9.5
Totals . .	85,120	2,500	34.0	79.8	2.5	13.4

REVIEW OF VITAL STATISTICS IN SMETHWICK DURING THE  
PAST 25 YEARS.

Year	Estimated population	Birth-rate per 1,000	Death-rate per 1,000	Infant mor- tality rate per 1,000 births	Death-rates per 1,000					
					Zymotic death-rate per 1,000	Respiratory diseases	Pulmonary tuberculosis	Non- pulmonary tuber- culosis	Cancer	
1905 . .	63,000	30.3	15.0	139	1.7	2.7	0.73	0.71	0.60	
1906 . .	65,000	31.2	14.6	130	2.21	2.7	1.03	0.50	0.67	
1907 . .	67,000	29.4	14.34	116	1.43	3.1	0.78	0.31	0.85	
1908 . .	69,500	30.0	14.5	135	1.84	2.7	0.86	0.53	0.70	
1909 . .	70,300	28.1	13.4	116	2.23	2.8	0.82	0.38	0.78	
1910 . .	72,000	27.35	12.42	108	1.3	2.1	0.84	0.33	0.54	
1911 . .	70,681	27.8	14.6	140	2.3	2.6	0.94	0.49	0.79	
1912 . .	73,372	25.8	12.32	111	0.9	2.8	0.9	0.20	0.7	
1913 . .	72,936	28.1	14.98	127	2.1	3.1	0.8	0.10	0.76	
1914 . .	72,975	27.5	14.13	106	1.67	3.4	1.26	0.19	0.89	
1915 . .	72,439	25.88	13.8	109.3	2.13	3.02	1.10	0.21	0.98	
1916 . .	78,335	22.04	11.08	93.8	0.77	3.33	1.20	0.15	0.84	
1917 . .	78,335	20.32	11.5	99.8	0.71	3.9	1.30	0.05	0.86	
1918 . .	76,056	20.28	15.63	102.4	0.6	3.56	1.43	0.16	0.9	
1919 . .	73,000	22.19	13.00	84.6	0.45	3.2	1.19	0.12	1.03	
1920 . .	75,027	27.08	11.16	82.18	0.64	2.4	0.81	0.31	0.92	
1921 . .	77,400	25.46	11.11	88.28	0.69	2.27	0.68	0.22	0.85	
1922 . .	78,140	21.39	11.22	86.12	0.67	2.31	0.78	0.32	1.13	
1923 . .	78,450	20.24	10.82	65.49	0.79	1.82	0.93	0.17	1.04	
1924 . .	78,790	20.19	10.12	74.79	0.41	1.87	0.67	0.17	1.20	
1925 . .	78,840	18.36	10.36	80.11	0.52	1.91	0.77	0.24	1.10	
1926 . .	76,940	18.35	10.39	65.86	0.37	1.88	0.79	0.10	1.26	
1927 . .	76,870	17.0	11.9	78.6	0.61	2.26	0.84	0.05	1.19	
1928 . .	86,870	16.7	9.7	61.6	0.28	1.52	0.69	0.10	1.11	
1929 . .	85,120	17.8	13.4	79.8	0.70	2.58	0.95	0.12	1.23	

# NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS) DURING THE YEAR 1929.

DISEASE.	TOTAL CASES NOTIFIED.													Cases admitted to Hospital	TOTAL DEATHS.													
	AGE GROUPS.														AGE GROUPS.													
	All Ages	0- 1	1- 2	2- 3	3- 4	4- 5	5- 10	10- 15	15- 20	20- 35	35- 45	45- 65	& up		All Ages	0- 1	1- 2	2- 3	3- 4	4- 5	5- 10	10- 15	15- 20	20- 35	35- 45	45- 65	& up	
Smallpox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Enteric Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Scarlet Fever	..	162	3	5	8	15	87	19	13	9	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Diphtheria	..	143	..	3	5	7	50	19	18	25	7	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Erysipelas	..	35	..	..	..	..	..	2	3	7	4	16	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Puerperal Fever	..	3	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Puerperal Pyrexia	..	5	..	..	..	..	..	..	..	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Ophthalmia neonatorum	..	13	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Cerebro-spinal Fever	..	1	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Encephalitis Lethargica	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Anterior Poliomyelitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Malaria	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Dysentery	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Primary Pneumonia	..	278	9	14	8	11	25	13	19	74	37	40	17	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Influenzal Pneumonia	..	95	2	4	1	..	6	2	9	16	13	32	10	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Totals	..	739	25	24	19	26	34	168	56	63	140	63	91	30	272	130	4	7	3	1	2	4	1	3	18	14	51	22

# SMETHWICK & OLDBURY JOINT ISOLATION HOSPITAL.

STATEMENT OF CASES ADMITTED AND DISCHARGED DURING THE YEAR 1929.

	Number of Cases in Hospital on December 31st, 1928.				Number of Cases Admitted during 1929.				Cases Discharged, Died, or Transferred to other Institutions during 1929.				Number of Cases in Hospital on December 31st, 1929.			
	Males.	Fe-males.	Children under 16	Total.	Males.	Fe-males.	Children under 16	Total.	Males.	Fe-males.	Children under 16	Total.	Males.	Fe-males.	Children under 16	Total.
SMETHWICK : Scarlet Fever Diphtheria	..	..	4	4	5	8	83	96	5	8	79	92	..	..	8	8
	..	3	12	15	5	18	67	90	5	21	70	96	..	..	9	9
OLDBURY : Scarlet Fever Diphtheria	..	..	2	2	2	3	27	32	2	3	23	28	..	..	6	6
	..	1	1	2	2	3	18	23	3	3	17	23	..	..	2	2
Totals	1	3	19	23	14	32	195	241	15	35	189	239	..	..	25	25

SCARLET FEVER :—The following complications occurred :  
Cases

Adenitis	..	..	..	5
Arthritis	..	..	..	2
Otorrhœa	..	..	..	10
Nephritis	..	..	..	1

DIPHTHERIA :—The following complications occurred :  
Cases

Cardiac paresis	..	..	..	2
Palatal paresis	..	..	..	5
Otorrhœa	..	..	..	1
Tonsillitis and Post-tonsillar Abscess	..	..	..	4
jaundice	..	..	..	1
Tracheotomy was performed in 2 cases during the year : both recovered.	..	..	..	1

## PREVALENCE OF, AND CONTROL OVER INFECTIOUS DISEASES.

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### SCARLET FEVER.

During the year under review 162 cases of Scarlet Fever were notified, against 87 last year. Fifty-nine per cent. of the cases were removed to the Joint Isolation Hospital, Holly Lane. No death occurred.

There were 104 cases of Scarlet Fever in children of school age, compared with 52 in the previous year. The incidence was not marked in any particular school.

The age incidence of the persons attacked will be found in the table on page 15.

The incidence of, and mortality from Scarlet Fever during the past ten years is as follows :—

Year	Cases notified	Attack Rate per 1,000 population	Number of deaths	Case mortality per cent.
1920 .. .. .	514	6.8	2	0.4
1921 .. .. .	426	5.5	3	0.7
1922 .. .. .	270	3.4	2	0.7
1923 .. .. .	207	2.6	4	1.9
1924 .. .. .	126	1.5	—	—
1925 .. .. .	165	2.0	3	1.8
1926 .. .. .	74	0.9	1	1.3
1927 .. .. .	92	1.2	1	1.0
1928 .. .. .	87	1.0	—	—
1929 .. .. .	162	1.9	—	—

### DIPHTHERIA.

This disease continued to be prevalent throughout the year, one hundred and forty-three cases being notified, compared with 119 during the preceding year. The mortality fortunately continued lower than for a number of years ; two deaths occurred or 1.7 per cent. of the total cases notified.

There were 62 cases in children of school age, against 60 last year. The incidence was not marked in any particular school.

Seventy-three per cent. of the cases were removed to the Isolation Hospital. The age periods of the persons attacked will be found in the table on page 15.

The incidence of, and mortality from Diphtheria during the past ten years is as follows :—

Year	Cases notified	Attack rate per 1,000 population	Number of deaths	Case mortality per cent.
1920 .. .. .	177	2.3	16	9.0
1921 .. .. .	132	1.7	9	6.8
1922 .. .. .	119	1.5	10	8.4
1923 .. .. .	138	1.75	10	13.7
1924 .. .. .	141	1.78	7	4.9
1925 .. .. .	104	1.3	5	4.8
1926 .. .. .	110	1.4	9	8.1
1927 .. .. .	120	1.5	3	2.5
1928 .. .. .	119	1.4	2	1.7
1929 .. .. .	143	1.6	2	1.7

Antitoxin is supplied free to medical practitioners in the Borough, 104 phials of 8,000 units being issued during the year, compared with 117 last year, and 160 in 1927.

No further advantage has been taken of the facilities offered to parents for the protection of their children against this dangerous disease by means of Toxoid-Antitoxin inoculation. Toxoid-Antitoxin is now available free of charge to medical practitioners in the town for prophylaxis in the same way as Antitoxin is given for curative purposes.

#### ENTERIC FEVER.

One case of para-typhoid fever was notified in January ; the patient, a male, aged 4 years, died in the Children's Hospital, Birmingham. Investigations failed to reveal any probable source of infection.

Two cases of typhoid fever were notified in November, a male, aged 14 years, and a female, aged 21 years, both members of the same family. The former case proved fatal. All the members of the family had eaten crayfish two days prior to the calling in of a doctor in the first case. The faeces of the remaining members of the family were examined bacteriologically, but with negative results and no illness occurred among them. The father of the patients gave a history of typhoid fever forty-three years ago, at age nine. It would seem that there was no connection between the eating of the crayfish and the typhoid.

#### ENCEPHALITIS LETHARGICA.

No case was reported during the year, against one last year, one in 1927, four in 1926 and seven in 1925. One death occurred : the patient died outside the Borough, and the case was not notified to this Department.

#### CEREBRO-SPINAL FEVER.

One case of this disease was reported during the year.

#### ANTERIOR POLIOMYELITIS.

No case of this disease was reported during the year.

#### DYSENTERY.

No case of this disease was reported during the year.



## SMALLPOX.

No case of smallpox was notified during the year.

Leaflets are distributed at the Infant Welfare Centres and at the Health Office, placing before the public the benefits of vaccination.

The Vaccination Officer's Return for the twelve months ended 30th June, 1929, and for previous years is given below. In 1911-12 the conscientious objectors represented 18.1 per cent. This figure gradually rose to 34.4 per cent. in 1920-21 and fell to 25 per cent. in 1923-24. Last year the percentage had risen to 38.9, and in view of the continued prevalence of Smallpox throughout the country, this tendency to neglect the protection which vaccination affords is much to be deplored.

## VACCINATION RETURNS FOR THE PAST TEN YEARS.

Year ending 30th June	Births	Vaccinations	Insuscep- tible	Conscien- tious objectors	Died unvac- cinated	Postponed by medical certificate	Gone to other districts	Gone—no address	Outstanding	Percentage of conscien- tious objections*
1929	996	471	3	364	60	14	6	31	47	38.9
1928	1,094	577	4	376	36	10	5	14	72	35.5
1927	1,158	656	—	385	59	12	5	10	31	35.0
1926	1,267	731	2	414	62	20	4	6	28	34.3
1925	1,406	866	3	404	55	29	7	15	27	29.9
1924	1,448	958	2	343	76	13	15	9	32	25.0
1923	1,535	984	—	428	62	15	6	10	30	29.0
1922	1,759	1,024	2	561	101	14	7	17	33	33.8
1921	1,884	1,046	5	608	119	32	10	20	44	34.4
1920	1,944	1,153	2	549	118	44	17	25	36	29.0

\* In calculating these percentages the number dying unvaccinated has been deducted from the total number of births.

## PNEUMONIA.

The cases of Primary Pneumonia notified during the year numbered 278 compared with 105 last year. Ninety-five cases of Influenzal Pneumonia were reported against 32 last year. The notifications and deaths for each year since the commencement of the Pneumonia Regulations are as follows :—

## PRIMARY PNEUMONIA. INFLUENZAL PNEUMONIA.

Year.	Notifications.		Deaths.	
1920	..	..	..	..
1921	..	..	..	..
1922	..	..	..	..
1923	..	..	..	..
1924	..	..	..	..
1925	..	..	..	..
1926	..	..	..	..
1927	..	..	..	..
1928	..	..	..	..
1929	..	..	..	..

## MEASLES.

Measles was very prevalent during the year and 25 deaths occurred, compared with 2 last year and 20 in 1927. I have already dealt with this subject in the introduction to this Report, but it is striking that for the last two years we have had no deaths at all from Scarlet Fever, and yet provide

a block of beds at Holly Lane Isolation Hospital for its treatment. This year twenty-five deaths have occurred from measles, and there are no facilities for the treatment of such cases.

### WHOOPIING COUGH.

This disease was also very prevalent at the beginning of the year and there were seventeen deaths, compared with ten deaths last year, and ten in 1927. The remarks I have made about measles in the foregoing paragraph apply also to Whooping Cough.

### INFLUENZA.

A full account of the disastrous epidemic which occurred during the first four months of the year is given elsewhere in this Report. No less than 223 persons died from Influenza or Pneumonia during the year, or more than four times the number for the previous year.

### INFECTIOUS DISEASES AND DISINFECTION.

Immediately on receipt of a notification of Infectious Disease, the premises are visited by a Sanitary Inspector. At these visits arrangements are made for the efficient isolation of the patient, or alternatively for removal of the case to the Isolation Hospital. The circumstances in connection with the case, such as occupation of patient and family, sources of water supply and milk supply, probable sources of infection, etc., are recorded and tabulated and any unsanitary conditions found are noted and dealt with. Cards of instruction as to the prevention of the spread of infection are sent to the parents or guardians in each case, and the Education Office notified of all children of school age in infected houses.

On the termination of the illness, or on removal of a case to hospital, the premises are disinfected by means of formalin spray or lamp, and where necessary notices are served upon the owners to strip and limewash the rooms occupied by the patient. Infected clothing, bedding, etc., is removed to the Isolation Hospital and dealt with in a Manlove & Elliott's steam disinfecter.

The number of lots of bedding, etc., removed for disinfection during the year was 544, comprising 5,633 articles. The total number of disinfections was 550, and the following is a classified list of the reasons for the disinfection of premises :—

Scarlet Fever	..	..	..	..	141
Diphtheria	..	..	..	..	127
Tuberculosis	..	..	..	..	180
Para-Typhoid	..	..	..	..	1
Erysipelas	..	..	..	..	4
Puerperal Fever	..	..	..	..	3
Puerperal Pyrexia	..	..	..	..	1
Pneumonia	..	..	..	..	4
Typhoid Fever	..	..	..	..	2
Cerebro Spinal Fever	..	..	..	..	1
Malaria	..	..	..	..	1
Cancer	..	..	..	..	60
Measles	..	..	..	..	1
Verminous Houses	..	..	..	..	3
Schools	..	..	..	..	5
Other causes	..	..	..	..	16



## BACTERIOLOGICAL EXAMINATIONS.

Arrangements are made for the necessary routine bacteriological examinations to be carried out by the Public Health Laboratory of the University of Birmingham. The number of specimens examined during the year, and the results, are set out below :—

Nature of Specimen.	Number.	Positive.	Negative.
Throat Swabs for Diphtheria bacilli—			
Suspects .. .. .	451	88	363
Contacts .. .. .	159	28	131
Nasal Swabs for Diphtheria bacilli—			
Suspects .. .. .	5	3	2
Contacts .. .. .	70	26	44
Exudate from Eyes for Gonococci ..	3	2	1
Blood for B. Typhosus .. ..	8	—	8
Blood for B. Para-Typhosus .. ..	8	—	8
Fæces for B. Typhosus, Enteric Group ..	10	—	10
Sputum for Tubercle bacilli .. ..	488	74	414
Urine for Tubercle bacilli .. ..	1	1	—
Cerebro Spinal Fluid .. ..	1	—	1
Milk for Bacterial Count .. ..	102	—	—
Totals	<u>1,306</u>	<u>222</u>	<u>982</u>

In addition to the above, 304 swabs were examined for Diphtheria bacilli at the Hospital, Holly Lane, from patients in the hospital, 22 giving positive and 282 negative results. Two consecutive negative swabs are required before a patient is discharged.

## ANNUAL REPORT OF THE TUBERCULOSIS OFFICER FOR THE YEAR 1929.

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### NOTIFICATIONS.

One hundred and forty-two notifications were received during the year, 108 of Pulmonary Tuberculosis and 34 of other forms of the disease. The following table shows the notifications received and the attack-rate for each year since the commencement of the Public Health (Tuberculosis) Regulations, 1912 :—

				Attack Rate per 1,000 of the Population :	
		Notifications received :		Pulmonary.	Other Forms.
		Pulmonary.	Other Forms.	Pulmonary.	Other Forms.
1912	.. ..	307	—	4.1	—
1913	.. ..	318	50	4.3	0.68
1914	.. ..	143	167	1.9	2.2
1915	.. ..	229	103	3.1	1.4
1916	.. ..	204	117	2.6	1.4
1917	.. ..	206	126	2.6	1.6
1918	.. ..	194	80	2.5	1.0
1919	.. ..	260	60	3.5	0.8
1920	.. ..	146	31	1.9	0.4
1921	.. ..	88	14	1.1	0.18
1922	.. ..	112	17	1.4	0.2
1923	.. ..	80	18	1.02	0.2
1924	.. ..	110	18	1.39	0.2
1925	.. ..	74	24	0.9	0.3
1926	.. ..	94	16	1.2	0.2
1927	.. ..	87	38	1.1	0.49
1928	.. ..	73	25	0.8	0.29
1929	.. ..	108	34	1.2	0.4

The deaths from all forms of Tuberculosis during the year numbered 92, of which 81 were notified cases, and 11 not notified ; 8 of these were deaths occurring outside the Borough. The ratio of unnotified deaths to the total deaths is 11.9 per cent., against 5.8 per cent. last year, and 4.3 per cent., 8.7 per cent., 25 per cent., 26 per cent., 29.8 per cent., and 38 per cent. in the six preceding years. The steps taken to secure better notification have thus had satisfactory results.

The following table shows the total NEW CASES during the year, i.e., all PRIMARY NOTIFICATIONS and also other NEW CASES coming to the knowledge of the Medical Officer of Health from the death returns or otherwise, and also the deaths registered during the year :—

## TUBERCULOSIS.

AGE PERIODS.	NEW CASES.				DEATHS.			
	Pulmonary.		Other Forms.		Pulmonary.		Other Forms.	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1 .. ..	—	—	1	2	—	—	—	2
1 to 5 .. ..	2	1	5	1	1	2	3	—
5 to 10 .. ..	—	—	6	4	—	—	1	2
10 to 15 .. ..	—	2	3	3	—	—	1	—
15 to 20 .. ..	2	6	2	5	1	2	—	—
20 to 25 .. ..	9	11	1	1	7	5	—	—
25 to 35 .. ..	13	16	2	3	7	4	—	1
35 to 45 .. ..	13	10	—	1	10	12	—	—
45 to 55 .. ..	17	6	—	—	15	5	—	1
55 to 65 .. ..	3	5	—	—	4	1	—	—
65 upwards ..	2	2	—	—	2	3	—	—
Totals .. ..	61	59	20	20	47	34	5	6

The discrepancy between the number of new cases and the number of notifications received is accounted for by the unnotified deaths and cases transferred from other areas.

The number of deaths from Tuberculosis in 1929 was higher than for some years, and was 35 per cent. higher than in 1928. This was due in the main to the influenza epidemic in the spring coupled with the very severe frost, both of which affected the tuberculous population very severely. Spread over five-yearly periods, however, the death-rate from tuberculosis in Smethwick is steadily declining.

## MEMO. 37-T. TABLE I.

## RETURN SHOWING THE WORK OF THE DISPENSARY (OR DISPENSARIES) DURING THE YEAR 1929.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.			
	Adults.		Children.		Adults.		Children.		Adults.		Children.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
A.—NEW CASES examined during the year (excluding contacts):—												
(a) Definitely tuberculous ..	46	51	—	1	1	7	9	6	47	58	9	7
(b) Doubtfully tuberculous ..	—	—	—	—	—	—	—	—	15	16	12	11
(c) Non-tuberculous ..	—	—	—	—	—	—	—	—	17	20	10	17
B.—CONTACTS examined during the year:—												
(a) Definitely tuberculous ..	2	—	1	—	—	—	—	—	2	—	1	—
(b) Doubtfully tuberculous ..	—	—	—	—	—	—	—	—	3	7	4	5
(c) Non-tuberculous ..	—	—	—	—	—	—	—	—	18	37	31	33
C.—CASES written off the Dispensary Register as												
(a) Cured ..	3	7	—	1	—	—	—	—	3	7	—	1
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error) ..	—	—	—	—	—	—	—	—	57	94	70	76
D.—NUMBER OF PERSONS on Dispensary Register on December 31st:—												
(a) Diagnosis completed ..	123	143	5	3	19	29	68	40	142	172	73	43
(b) Diagnosis not completed ..	—	—	—	—	—	—	—	—	4	2	4	4

1.—Number of persons on Dispensary Register on January 1st ..	438
2.—Number of patients transferred from other areas and of "lost sight of" cases returned .. .. .	14
3.—Number of patients transferred to other areas and cases "lost sight of" .. .. .	6
4.—Died during the year .. .. .	74
5.—Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months ..	54
6.—Number of attendances at the Dispensary (including Contacts)	2,987
7.—Number of attendances of non-pulmonary cases at Orthopædic Out-stations for treatment or supervision .. ..	—
8.—Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for	
(a) "Light" treatment .. .. .	772
(b) Other special forms of treatment .. .. .	—
9.—Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary .. .. .	57
10.—Number of consultations with medical practitioners :—	
(a) At Homes of Applicants .. .. .	25
(b) Otherwise .. .. .	182
11.—Number of other visits by Tuberculosis Officers to Homes ..	12
12.—Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes .. .. .	2,348
13.—Number of	
(a) Specimens of sputum, etc., examined .. .. .	308
(b) X-ray examinations made .. .. . in connection with Dispensary work.	69
14.—Number of Insured Persons on Dispensary Register on the 31st December .. .. .	228
15.—Number of Insured Persons under Domiciliary Treatment on 31st December .. .. .	78
16.—Number of reports received during the year in respect of Insured Persons :—	
(a) Form G.P. 17 .. .. .	18
(b) Form G.P. 36 .. .. .	53



## RESIDENTIAL INSTITUTIONS.

(A) AVERAGE NUMBER OF BEDS AVAILABLE FOR PATIENTS  
DURING THE YEAR 1929.

	Observation.	Pulmonary Tuberculosis.		Non-Pulmonary Tuberculosis.		Total.
		"Sanatorium" Beds.	"Hospital" Beds.	Diseases of Bones & Joints.	Other Conditions.	
Adult Males	.. 12 Chalets	12	8	1		33
Adult Females	.. —	8	8	—		16
Children under 15	—	—	—	6		6
Total ..	.. 12 Chalets	20	16	7		55

(B) RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT  
DURING THE YEAR 1929.

	In Institutions on Jan. 1.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31.
No. of Patients : Adults : M.	23	81	67	13	24
F.	13	58	52	7	12
Children : M.	6	4	3	1	6
F.	1	2	1	1	1
No. of Observation Cases : Adults : M.	—	2	2	—	—
F.	—	—	—	—	—
Children : M.	—	1	1	—	—
F.	—	1	1	—	—
Total .. ..	43	149	127	22	43



**Return showing the immediate results of treatment of patients  
and of observation of doubtful cases discharged from Residential  
Institutions during the year 1929.**

Classification on admission to the Insti- tution.	Condition at time of discharge.	Duration of Residential Treatment in the Institution.					Total
		Under 3 months.	3—6 months.	6—12 months.	More than 12 months.		
		M. F. Ch.	M. F. Ch.	M. F. Ch.	M. F. Ch.		
PULMONARY TUBERCULOSIS.	Class T.B. minus.	Quiescent .. .. .	— 1 —	2 — —	— — —	— — —	3
		Improved .. .. .	4 9 —	10 7 1	3 2 —	— — —	36
		No material improvement ..	1 — —	1 — —	— — —	— — —	2
		Died in Institution ..	2 — —	2 — —	— — —	— — —	4
	Class T.B. plus. Group 1.	Quiescent .. .. .	— — —	— — —	— — —	— — —	—
		Improved .. .. .	3 2 —	2 4 —	— 1 —	— — —	12
		No material improvement ..	1 2 —	— 3 —	— — —	— — —	6
		Died in Institution ..	1 — —	— — —	— — —	— — —	1
	Class T.B. plus. Group 2.	Quiescent .. .. .	— — —	— — —	— — —	— — —	—
		Improved .. .. .	5 3 —	5 4 —	4 — —	1 — —	22
		No material improvement ..	9 2 —	4 2 —	1 — —	— — —	18
		Died in Institution ..	3 2 —	— — —	— — —	1 — —	6
	Class T.B. plus. Group 3.	Quiescent .. .. .	— — —	— — —	— — —	— — —	—
		Improved .. .. .	1 2 —	3 1 —	— 1 —	— 1 —	9
		No material improvement ..	2 3 —	3 — —	1 — —	— — —	9
		Died in Institution ..	3 3 —	— 1 —	1 1 —	— — —	9
NON-PULMONARY TUBERCULOSIS	Bones and Joints.	Quiescent or Arrested ..	— — —	— — —	— — —	— — —	—
		Improved .. .. .	— — —	— 1 —	— — —	— — —	2
		No material improvement ..	— — —	— — —	— — —	— — —	—
		Died in Institution ..	— — —	— — —	— — —	— 1 —	1
	Abdominal	Quiescent or arrested ..	— — —	— — —	— — —	— — —	—
		Improved .. .. .	— — —	— — —	— — —	— — —	—
		No material improvement ..	— — —	— — —	— — —	— — —	—
		Died in Institution ..	— — —	— — —	— — —	— — —	—
	Other Organs.	Quiescent or Arrested ..	— — —	— — —	— — —	— — —	—
		Improved .. .. .	1 — —	— 1 —	— — —	— — —	—
		No material improvement ..	— — —	— — —	— — —	— — —	—
		Died in Institution ..	— — —	— — —	— — —	— — —	—
	Peripheral Glands.	Quiescent or Arrested ..	— — —	— — —	— — —	— — —	—
		Improved .. .. .	— — —	— — 1	— — —	— — —	—
		No material improvement ..	— — —	— — —	— — —	— — —	—
		Died in Institution ..	— — 1	— — —	— — —	— — —	—
		Under 1 week.	1—2 weeks.	2—4 weeks.	More than 4 weeks.		
	Observa- tion for purpose of diagnosis.	Tuberculous .. .. .	— — —	— — —	— — —	— — —	—
	Non-tuberculous .. ..	— — 1	1 — —	— — 1	1 — —	— — —	—
	Doubtful .. .. .	— — —	— — —	— — —	— — —	— — —	—



Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary (or Dispensaries) at the end of 1929, arranged according to the years in which the patients first came under Public Medical Treatment for pulmonary tuberculosis, and their classification as shown on Form A.

Previous to 1926										1926				1927				1928				1929																																											
Class T.B. minus.										Class T.B. plus				Class T.B. minus.				Class T.B. plus				Class T.B. plus																																											
Group 1.										Group 2.				Group 3.				Total (Cl. T.B. plus)				Group 1.				Group 2.				Group 3.				Total (Cl. T.B. plus)																															
Adults { M. 49										Adults { M. 1				Adults { M. 2				Adults { M. 10				Adults { M. 7				Adults { M. 3				Adults { M. 17				Adults { M. 23				Adults { M. 1				Adults { M. 11				Adults { M. 8				Adults { M. 4				Adults { M. 22											
Children { F. 67										Children { F. 1				Children { F. 1				Children { F. 4				Children { F. 2				Children { F. 1				Children { F. 6				Children { F. 11				Children { F. 23				Children { F. 1				Children { F. 8				Children { F. 3				Children { F. 19											
Adults { M. 1										Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1											
Children { F. 1										Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1							
Adults { M. 10										Adults { M. 10				Adults { M. 10				Adults { M. 10				Adults { M. 10				Adults { M. 10				Adults { M. 10				Adults { M. 10				Adults { M. 10				Adults { M. 10				Adults { M. 10				Adults { M. 10				Adults { M. 10				Adults { M. 10							
Children { F. 10										Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10				Children { F. 10			
Adults { M. 2										Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2				Adults { M. 2			
Children { F. 2										Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2				Children { F. 2			
Condition not ascertained during the year .. ..										Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..				Condition not ascertained during the year .. ..							
Lost sight of or otherwise removed from Dispensary Register ..										Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..				Lost sight of or otherwise removed from Dispensary Register ..			
Adults { M. 6										Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6				Adults { M. 6			
Children { F. 8										Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8				Children { F. 8			
Adults { M. 1										Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1				Adults { M. 1			
Children { F. 1										Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1				Children { F. 1			
Totals .. ..										Totals .. ..				Totals .. ..				Totals .. ..				Totals .. ..				Totals .. ..				Totals .. ..				Totals .. ..				Totals .. ..				Totals .. ..				Totals .. ..				Totals .. ..				Totals .. ..				Totals .. ..							

ALIVE.

(b) NON-PULMONARY TUBERCULOSIS.

Annual Return showing in summary form the condition of all Patients whose case records are in the possession of the Dispensary (or Dispensaries) at the end of 1929, arranged according to the years in which the Patients first came under Public Medical Treatment, and their classification as shown on Form A.

		Previous to 1926.					1926					1927					1928					1929				
		Bones and Joints.	Abdominal.	Other Organs.	Peri-pheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peri-pheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peri-pheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peri-pheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peri-pheral Glands.	Total.
Condition at the time of the last record made during the year to which the Return relates.	Adults { M. F. }	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Children { M. F. }	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Discharged as cured.	Adults { M. F. }	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Children { M. F. }	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Disease arrested.	Adults { M. F. }	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Children { M. F. }	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Disease not arrested.	Adults { M. F. }	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Children { M. F. }	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Transferred to Pulmonary	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Condition not ascertained during the year	..	3	..	3	1	7	..	..	1	3	4	2	..	..	1	4	..	..	..	..	..	..	..	..	..	..
Lost sight of or otherwise removed from Dispensary Register	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DEAD.	Adults { M. F. }	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Children { M. F. }	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total	..	13	4	12	87	116	5	1	6	5	17	21	5	5	4	42	9	8	6	7	30	7	6	7	3	23

ALIVE.

## PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

It was not necessary to take action under these regulations during the year.

### PUBLIC HEALTH ACT, 1925, SECTION 62.

The Council provide beds for advanced cases at Holly Lane Hospital, but in no case was it found necessary to apply for an Order for the compulsory removal of a patient to hospital. It is found, however, that the possession of the powers of compulsory removal is of considerable value, though it is seldom that these powers have to be called into operation.

### AFTER-CARE WORK.

After-care work has been carried out by the Staff at the Chest Clinic and the following is a summary of the work done during the year :—

Patients receiving loan of beds and bedding .. ..	15
Patients receiving loan of shelters, including beds ..	14
Advanced cases on domiciliary treatment receiving loans of bed-pans, air-cushions, etc. .. .. .	49
Cases receiving grants of milk .. .. .	51

### HOME NURSING AND EXTRA NOURISHMENT.

In 51 cases, extra nourishment in the form of grants of milk was given during the year, as against 32 cases in 1928.

### NON-PULMONARY TUBERCULOSIS.

During the year seven cases of surgical tuberculosis were sent to various institutions, the chief of which were "The Woodlands," Northfield, and "The Forlands," Bromsgrove; one case was sent to the Shropshire Orthopædic Hospital, near Oswestry. The number of cases dealt with in institutions is considerably larger than in previous years. Cases of surgical tuberculosis requiring treatment are referred from the Chest Clinic to the Smethwick Cripples Union, who also undertake the after-care of these patients. Treatment is prescribed and supervised by Mr. F. Wilson Stuart, the orthopædic surgeon to the Royal Cripples Hospital, Birmingham. Cases recommended by him for institutional treatment are paid for by the Health Committee.

Surgical appliances are provided as required, the parents being asked to pay a proportion of the cost.

Certain of these cases have received ultra-violet radiation treatment during the year, the results being shown in the Table on page 48.

### DENTAL TREATMENT.

By arrangement with the Education Committee the services of one of the school dentists is available for the dental treatment of tuberculous patients. Under this scheme 57 patients were dealt with during the year, the majority being seen at Holly Lane Hospital.

## RECREATION.

Contributions of books, periodicals, etc., for the patient's library will be welcomed from anyone reading this Report. Through the kindness of Mr. H. V. Worwood and the Smethwick Insurance Committee, newspapers and periodicals are supplied to the patients at Holly Lane.

We have again to thank Mr. T. Collins, J.P., for the interest he has taken in the wireless receiving set installed at Holly Lane, and our thanks are also due to the Smethwick Wireless Society who kindly undertook the maintenance of the installation during the year.

The carpenter's shop has continued to be useful.

## VENEREAL DISEASES.

By arrangement, treatment is available for Smethwick patients at the General Hospital, Birmingham. The Centre is open on the following days :—

MEN : Mondays and } from 10 a.m. to 12 noon, and  
Wednesdays } from 5.15 p.m. to 7.15 p.m.

Tuesdays, }  
Thursdays } from 5.15 p.m. to 7.15 p.m.  
& Fridays }

Women : Mondays & } from 5.15 p.m. to 7.15 p.m.  
Thursdays }

Tuesdays & } from 10 a.m. to 12 noon.  
Fridays }

Children : Tuesdays & } at 4.30 p.m.  
Fridays }

Subject to adjustment from time to time to meet additional demands.

The number of Smethwick residents dealt with at the Centre during the year, was 111, compared with 82 last year, 85 in 1927, 83 in 1926, 89 in 1925, 64 in 1924, 61 in 1923, 74 in 1922, 73 in 1921 and 120 in 1920.

The Report of the Medical Officer of the Treatment Centre for the year under review shows :—

- A. Number of Smethwick patients dealt with during the year, at or in connection with the Out-Patient Clinic for the first time, and found to be suffering from :—

Syphilis	..	..	..	..	..	..	..	22
Soft Chancre			..	..	..	..	..	1
Gonorrhoea	..	..	..	..	..	..	..	48
Conditions other than Venereal..				..	..	..	..	40

Total 111

B. Total number of attendances at the Out-patient Clinic of all residing in Smethwick .. .. .	4,172
C. Aggregate number of "In-patient days" of all patients residing in Smethwick .. .. .	70
D. Number of doses of Salvarsan substitute given .. ..	729

Pathological examination made during the year 1929 relating to patients residing in Smethwick :—

For detection of Spirochetes .. .. .	6
For detection of Gonococci .. .. .	424
For Wasserman reaction .. .. .	189
Others .. .. .	204
Total .. .. .	<hr/> 823 <hr/>

## General Provision of Health Services in the Borough.

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### HOSPITALS PROVIDED OR SUBSIDISED BY THE LOCAL AUTHORITY.

(1) TUBERCULOSIS :—

Holly Lane Hospital, Smethwick. 22 beds for advanced and chronic cases, and 12 beds in chalets.

Romsley Hill Sanatorium, near Halesowen. (Birmingham Corporation). 20 beds reserved for Smethwick patients.

King Edward VII Memorial Sanatorium, Knightwick, Near Worcester. 2 beds reserved for Smethwick patients.

For Surgical Tuberculosis : Cases are sent to "The Woodlands," Northfield, "The Forelands," Bromsgrove, or the Shropshire Orthopædic Hospital.

(2) MATERNITY :—

Two beds reserved for cases of Puerperal Fever at the Women's Hospital, Sparkhill, Birmingham.

Under an Agreement between the Smethwick Corporation and the City of Birmingham, Smethwick patients are received in Dudley Road and Selly Oak Hospitals for maternity treatment, on the recommendation of the Medical Officer of Health. The Borough Treasurer collects from the patients such amounts towards the cost of treatment as the circumstances allow, according to a scale approved by the Council.

(3) CHILDREN :—

The Council make an annual contribution of £10 10s. od. to the Children's Hospital, Birmingham, in respect of the treatment of Tonsils and Adenoids in pre-school children.

(4) FEVER :—

Smethwick and Oldbury Joint Isolation Hospital, Holly Lane, Smethwick (total 60 beds). Diphtheria and Scarlet Fever cases only.

(5) SMALLPOX :—

South Staffordshire Joint Smallpox Hospital, Moxley, near Wednesbury.

### INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS, AND HOMELESS CHILDREN :—

None at present.



## AMBULANCE FACILITIES :—

- (a) For Infectious Cases : Smethwick and Oldbury Joint Hospital Committee have a motor ambulance, which is kept at the Isolation Hospital, Holly Lane, Smethwick. (Telephone : Smethwick 0159).
- (b) For Non-Infectious and Accident Cases : Town Ambulance kept at the Fire Station, Rolfe Street, Smethwick. (Telephone : Smethwick 0022).

## CLINICS AND TREATMENT CENTRES.

## INFANT WELFARE CENTRES :—

There are eight Infant Welfare Centres in the Borough, and sessions are held on the following days from 2 to 4.30 p.m., with the exception of Cape Centre.

- No. 1. Baptist Hall, Rawlings Road. Mondays and Wednesdays.  
 No. 2. 95, Soho Street. Tuesdays and Thursdays.  
 No. 3. St. Stephen's Hall, Sydenham Road, Wednesdays.  
 No. 4. Smethwick Hall School, Devonshire Road. Tuesdays.  
 No. 5. Congregational Church Hall, Oldbury Road. Fridays.  
 No. 6. St. Gregory's Hall, Wigorn Road. Fridays  
 No. 7. St. Chad's Hall, Shireland Road, Wednesdays, 9-12.30 a.m.  
 No. 8. St. Mark's Church, Warley Road. Thursdays.

## ANTE-NATAL CLINIC :—

Held at the "Uplands," Hales Lane, on Monday, Tuesday and Thursday afternoons, from 2 to 4.30 p.m., and on Wednesday and Thursday mornings, from 9.30 to 12 p.m.

## SCHOOL CLINICS :—

Two School Clinics are provided, one at 95, Soho Street, Six Ways, and one at Smethwick Hall Schools, Devonshire Road. The days and times of attendance are as follows :—

*Treatment Clinics :—*

Six Ways : Daily (except Saturday), mornings only.  
 Smethwick Hall : Tuesday, Wednesday, Thursday and Friday mornings.

*Inspection Clinics :—*

Six Ways : Tuesday and Friday mornings.  
 Smethwick Hall : Thursday morning.

## EYE CLINIC :—

Smethwick Hall : Monday 9.30 to 12.30 p.m. and 2 to 5 p.m., Thursday, 2 to 5 p.m.

## IONISATION CLINIC :—

Six Ways : Tuesday morning, 9.30 to 12.30 p.m.

## CLEANSING STATION (for Scabies, etc.) :—

Six Ways : Monday and Wednesday afternoons.

## DENTAL CLINICS :—

Six Ways : Daily from 9.30 to 5, except Tuesday and Thursday afternoons.

High Street : Daily from 9.30 to 5, except Wednesday afternoon.

## CHEST CLINIC :—

“The Uplands,” Hales Lane. New cases seen by appointment on Tuesdays from 6.0 to 8.30 p.m., and Wednesdays from 2.15 to 5.0 p.m.

Cases taken on for observation or treatment attend on Tuesdays from 10 to 1 p.m., or by appointment on Tuesday evenings from 6 to 8 p.m.

## ULTRA-VIOLET LIGHT CLINIC :—

At “The Uplands,” Hales Lane. Mondays, 9.0 to 1.0 p.m., and Fridays from 2.15 to 5.0 p.m. Tuesday evenings from 6.0 to 8.0 p.m. Additional sessions as required.

## X-RAY EXAMINATIONS :—

By appointment.

## PROFESSIONAL NURSING IN THE HOME :—

- (a) *General* : The Smethwick District Nursing Association, The Edward Cheshire Nurses' Home, Bearwood Road, Smethwick, has a nurse-matron and two nurses, who undertake general nursing among the poorer inhabitants in the district.

A grant of £25. per annum is made to the Association by the Council for emergency nursing of cases of Ophthalmia Neonatorum, when for some reason the nurses of the Health Department cannot attend.

- (b) *Infectious Diseases* : No service is provided, but a panel of handy-women is kept at the Health Office and their services utilised in certain cases.

## MIDWIVES :—

Seventeen midwives reside in the Borough, and a total of 27 notified their intention to practice in the area during the year.

In 1921 two midwives were trained, and these with a third, already trained, were subsidised by the Council for a period of twelve months. No midwife is at present receiving a subsidy from the Council.

## CHEMICAL WORK :—

This work is undertaken by the Public Analyst for the Borough.

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**Other Institutions available for the District.**

## GENERAL HOSPITAL, STEELHOUSE LANE, BIRMINGHAM :—

Out-patients' Department open daily from 9-10 a.m.

## QUEEN'S HOSPITAL, BATH ROW, BIRMINGHAM :—

Out-patients' Department open daily at 9 a.m.



CHILDREN'S HOSPITAL, LADYWOOD ROAD, BIRMINGHAM :—

For children under 12 years of age. Daily from 1.30—2.30 p.m.  
Saturday and Sunday excepted.

WOMEN'S HOSPITAL, SPARKHILL, BIRMINGHAM :—

(Out-patients' Department, Upper Priory, Birmingham). Daily (except Saturday) from 1.30—2 p.m.

EYE HOSPITAL, CHURCH STREET, BIRMINGHAM :—

Out-patients' Department open daily from 8.30—9.30 a.m.

SKIN AND URINARY HOSPITAL, JOHN BRIGHT STREET, BIRMINGHAM :—

Out-patients' Department open daily at 1.30 p.m. (Saturday excepted).

EAR, NOSE AND THROAT HOSPITAL, EDMUND STREET, BIRMINGHAM :—

Out-patients' Department open daily 9.30—11 a.m.

ROYAL CRIPPLES' HOSPITAL, BROAD STREET, BIRMINGHAM :—

Out-patients' Department open daily (except Saturday) from 1.30—2.30 p.m.

DENTAL HOSPITAL, GREAT CHARLES STREET, BIRMINGHAM :—

Daily from 9—10.15 a.m. .

HOMOEOPATHIC HOSPITAL, EASY ROW, BIRMINGHAM :—

Out-patients' Department open daily 9 a.m.—5 p.m., except Saturday, 9—1 p.m.

MATERNITY HOSPITAL, LOVEDAY STREET, BIRMINGHAM :—

Out-patients' are seen on Monday, Wednesday, Thursday and Saturday at 9 a.m., and Tuesday and Friday afternoons at 1.45 p.m.

THE BIRMINGHAM GENERAL DISPENSARY has a branch at Cape Hill, Smethwick:—Surgery Hours, 2—4 p.m. daily (except Wednesday).

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## Local Acts, Bye-laws, etc., relating to Public Health in force in the County Borough of Smethwick.

### LOCAL ACTS.

Smethwick Corporation Act, 1901.

Smethwick Corporation Act, 1927.

Smethwick Corporation Act, 1929.

### ADOPTIVE ACTS.

Baths and Wash-houses Acts—Adopted 11th September, 1885.

Infectious Diseases (Notification) Act, 1889.

Infectious Disease (Prevention) Act, 1890—Adopted 10th October, 1890.

Public Health Acts Amendment Act, 1895—Adopted 14th November, 1890.

Private Street Works Act, 1892—Adopted 10th March, 1893.

Public Health Acts Amendment Act, 1907—the following parts adopted 18th February, 1908—Part II., Sections 17 to 33 ; Part III., Sections 34 to 38, 45 to 47, 49 to 51 ; Part IV, Sections 52 to 66 and Section 68 ; Part V, the whole part ; Part X, the whole part.

Public Health Act, 1925—the following parts adopted 3rd May, 1926—Part II, Sections 13 to 33, and 35 ; Parts III, IV and V, the whole parts.

#### BYE-LAWS.

Street Cleansing and Nuisances, 1856.

Slaughter-houses, 1893.

Nuisances, 1914.

Good Rule and Government, 1921.

New Streets and Buildings, 1926.

Nursing Homes, 1929.

Smoke Abatement, 1930.

#### REGULATIONS.

Dairies, Cowsheds and Milkshops, 1901.

INFANT MORTALITY DURING THE YEAR 1929.

CAUSE OF DEATH.	Under 1 w'k	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 w'ks	1-2 m'ths	2-3 m'ths	3-4 m'ths	4-5 m'ths	5-6 m'ths	6-7 m'ths	7-8 m'ths	8-9 m'ths	9-10 m'ths	10-11 m'ths	11-12 m'ths	Total under 1 year
Measles .. ..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	2	1	1
Whooping Cough ..	..	..	..	..	..	1	..	..	..	..	1	..	1	..	2	..	6
Tuberculous Meningitis ..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	1	..	2
Septic Absorption (Ulcer)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Infantile Tetany ..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1
Status Lymphaticus ..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1
Convulsions ..	1	1	1	..	3	1	..	..	..	1	..	1	1	..	1	..	8
Bronchitis ..	..	..	2	..	2	..	1	..	..	..	2	..	2	..	..	..	3
Broncho-Pneumonia ..	..	..	2	1	3	..	6	1	1	1	..	..	..	5	..	1	24
Lobar Pneumonia ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3
Pneumonia (type not stated)	..	..	..	..	..	..	1	..	..	..	..	1	..	..	..	1	1
Ludwig's Angina ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3
Gastritis ..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1
Diarrhoea and Enteritis ..	..	..	1	1	2	1	..	1	3	1	2	2	..	..	..	..	12
Intestinal Obstruction ..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1
Pemphigus Neonatorum ..	..	..	..	2	2	..	..	..	..	..	..	..	..	..	..	..	2
Cong. Malformation of Heart ..	2	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	2
Other Congenital Malformations	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Debility, Marasmus ..	5	2	1	..	8	1	..	..	3	..	..	..	..	..	..	..	12
Premature Birth ..	20	2	1	3	26	..	1	..	..	..	..	..	..	..	..	..	27
Injury at Birth ..	4	1	..	..	5	..	..	..	..	..	..	..	..	..	..	..	5
Acid's Suffocation (overlying)	1	..	..	..	1	..	..	..	1	..	..	..	..	..	1	..	2
Asphyxia (Conflagration)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Injury by Fall ..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1
<b>Totals</b> .. ..	33	6	8	7	54	5	10	3	9	5	5	6	8	6	7	3	121

Births Registered during the Year : Legitimate 1,484 Illegitimate 32	Deaths Registered during the Year : Legitimate 116 Illegitimate 5	Rates 78.1 156.2
Total 1,516	Total 121	79.8

## MATERNITY AND CHILD WELFARE.

### SUMMARY OF STATISTICS FOR THE YEAR 1929.

#### BIRTHS.

Registered: (1) Legitimate, 1,484; (2) Illegitimate, 32; (3) Total, 1,516.

Notified within 36 hours of birth:—

(1) Live Births, 1,171; (2) Stillbirths, 22; (3) Total, 1,193.

(1) By Midwives, 1,130; (2) By parents and doctors, 63.

In addition to this number particulars of 294 births notified to the Medical Officers of Health of adjoining areas, and relating to Smethwick residents, were transferred to this Office.

#### INFANT DEATHS.

Number: (1) Legitimate, 116; (2) Illegitimate, 5; (3) Total, 121.

Rate per 1,000 births: (1) Legitimate, 78.1; (2) Illegitimate, 156.2  
(3) Total, 79.8.

#### MATERNAL DEATHS.

Number of women dying in, or in consequence of, childbirth:—

(1) From Sepsis, 3; (2) from other causes, 5.

The maternal death-rate is 5.2 per 1,000 births, compared with 3.0 in 1927, 4.8 in 1926, 4.8 in 1925, 4.4 in 1924, 6.9 in 1923, 1.7 in 1922 and 4.5 in 1921. The rate for England and Wales for 1928 was 4.42 per 1,000 births.

#### OPHTHALMIA NEONATORUM.

Number of cases notified, 13.

Cases treated by Health Department nurses, 8.

Cases treated at Birmingham and Midland Eye Hospital, 6.

Cases resulting in impaired vision, none.

Exudate from the eyes was examined in two instances and gonococci found in both cases.

Visits paid to cases of Ophthalmia Neonatorum by the nurses during the year, numbered 67.

Notifications for the past twelve years:—

1929	1928	1927	1926	1925	1924	1923	1922	1921	1920	1919	1918
13	21	9	11	15	27	31	32	34	61	43	54

## MATERNAL DEATHS.

It is very unsatisfactory to have to record that eight mothers lost their lives in childbirth during 1929; this is an increase over the figures for the past few years, which are as below:—

1929	..	..	..	8	1926	..	..	..	7
1928	..	..	..	6	1925	..	..	..	7
1927	..	..	..	4	1924	..	..	..	7

As one would naturally expect that the rapid extension of our Ante-Natal work would have as its first effect a reduction in the number of maternal deaths, I have carefully gone into the circumstances of each maternal death, with a view to ascertaining how many of these deaths were preventable, and if so, how such deaths could be prevented in the future.

An analysis of these eight deaths shows that the conditions which caused a fatal issue in two cases suggested abortion. In one of these cases an inquest was held and the verdict was "General peritonitis. Perforation of the uterus by some sharp instrument; evidence insufficient to show how perforation of the uterus was occasioned." In considering these two deaths, one wonders uncasily how many of these illegal operations are carried out with partial success, and how many result in chronic ill-health, which never come to the notice of a Health Department.

Two deaths were caused by sepsis, three by kidney conditions, and one died from hæmorrhage after the baby was born.

Of these eight cases, one attended the Ante-Natal Clinic regularly. This was the mother who died from hæmorrhage. The labour was normal in every way until after the baby was born, and no amount of ante-natal care could have prevented the fatal termination.

One other of the above attended the Ante-Natal Clinic, but only came once. She died from broncho-pneumonia and nephritis. The remaining six did not attend an Ante-Natal Clinic at any time.

## STILLBIRTHS.

The stillbirth rate for the year was 0.50 per 1,000 of the population, as compared with 0.68 per 1,000 for England and Wales as a whole.

## INFANT DEATHS.

Owing mainly to the influenza epidemic, which occurred during the very cold snap in February, March and April, the number of infant deaths was higher than for several years, and the death-rate was 79.8 per 1,000 births. The corresponding figures for the past 25 years are given on page 14, and it will be seen that the 1929 rate was the highest for seven years. The excessive mortality occurred entirely in the first quarter, while the second, third and fourth quarters showed the usual low figures.

The following shows the number of infant deaths in each of the four quarters of the year :—

1st quarter	..	..	..	..	57
2nd „	..	..	..	..	21
3rd „	..	..	..	..	22
4th „	..	..	..	..	21

Over 25 per cent. of the infant deaths occurred from bronchitis and pneumonia, the actual number being 31.

The 121 infants who died during the year have been divided into two groups ; those who attended one of our Welfare Centres, and those who did not attend, and it is found that although approximately 80 per cent. of the babies in the town attend an Infant Clinic, yet over three-quarters of the deaths occurred in children who never came.

The figures are :—

### INFANT DEATHS.

Did not attend Centre	..	..	92
Attended a Centre	..	..	29
			<hr/>
			121
			<hr/>

Of the 29 who attended a Welfare Centre, 14 or approximately half attended three times or less :—

6	attended once.
3	„ twice.
5	„ 3 times
2	„ 4 „
2	„ 5 „
2	„ 6 „
9	„ more than six times.

## HEALTH VISITORS.

In practice the town is divided into nine districts, to each of which one Health Visitor is allotted. Her duties include :—

School visiting, attendance at medical inspection and following up certain cases until treatment is completed.



Attendance at the Infant Welfare Centre of her district, and the home visiting of children who are attending.

Routine visiting of new births notified.

Routine visiting of children from 1 to 5 years.

Attendance in rotation at the Cleansing Station.

Attendance at the Ante-Natal Clinic.

Visiting expectant mothers.

Visiting and treatment of cases of Ophthalmia Neonatorum.

Routine inspection of midwives.

Investigation of applications for grants of milk in necessitous cases.

Visiting in connection with non-notifiable infectious diseases, i.e., Measles, Whooping Cough, Chickenpox, etc.

Supervision of mental defectives in the area.

The total number of visits paid by the Health Visitors during the past three years is as follows :—

1927	..	..	..	..	21,670
1928	..	..	..	..	29,998
1929	..	..	..	..	26,415

The reduction in 1929 was due to the fact that the staff was depleted for several months of the year by the resignations of Nurse Weale and Nurse Glascodine, who received appointments elsewhere. In September three nurses were appointed, since when the staff has been fully up to strength. The figures given above are exclusive of ineffective visits, of which several thousands were made.

## INFANT WELFARE CENTRES.

In February, 1929, to relieve the numbers attending at Bearwood and Six Ways, a new Clinic was started at St. Chad's Hall, Shireland Road, and Dr. Ainscow attends every Wednesday morning. This is the first session which has been held in the morning, as it is felt that the afternoon is the most suitable time for mothers to attend, but as each of the lady medical officers was engaged every afternoon at other Maternity or Infant Clinics, no option was left but to choose a morning. Our view that the morning is less convenient was proved by the fact that the new Centre grew more slowly than usual, and the attendances for several months were rather low. At the first session fourteen mothers attended, and in March the average attendance was 23, but this had increased by the end of the year to 47, a very satisfactory figure for a morning session.

Owing to the increase in the attendances at Warley which were approaching 100 per session last autumn, an eighth Welfare Clinic was started in Nov. at St. Mark's Church, Londonderry. This new Clinic is in the centre of the housing estate and serves an area in which there is a very large number of young children. The opening of this session, which is held on Thursday afternoons, necessitated the appointment of an additional part-time lady medical officer, and Dr. Trimble commenced duties in November. There were 37 attendances on the opening day, and the average attendance is already about 40.

There are now eight Centres in the Borough, two of which are open on two half-days per week, and six on one-half day per week. In addition, the Ante-Natal Clinic is open four half-days per week, making a total of 14 sessions weekly. A Lady Medical Officer attends at each session, and the Health Visitor for the district is in charge of the Centre, assisted by a second nurse and voluntary workers.

The average weekly attendance during the year was 573, compared with 500 in the previous year, and 458 in 1927. The names of 1,514 children were added to the rolls during the year, compared with 1,306 in the previous year, and 959 in 1927.

The days and times of meeting, and the average attendance at each Centre are set out below :—

Centre	Day and Time of Meeting	Average Attendance.		
		Under 1 year.	1—5 years.	Total.
1. Rawlings Road	.. Monday, 2 p.m.	35	35	70
Ditto .. ..	.. Wednesday, 2 p.m.	28	38	66
2. 95, Soho Street	.. Tuesday, 2 p.m.	27	29	56
Ditto .. ..	.. Thursday, 2 p.m.	35	37	72
3. Sydenham Road	.. Wednesday, 2 p.m.	23	31	54
4. Devonshire Road	.. Tuesday, 2 p.m.	31	31	62
5. Oldbury Road ..	.. Friday, 2 p.m.	23	26	49
6. Warley .. ..	.. Friday, 2 p.m.	40	38	78
7. Cape .. ..	.. Wednesday, 9.30 a.m.	20	15	35
8. Londonderry ..	.. Thursday, 2 p.m.	13	18	31

The total attendances at the Centres during the year was 25,783, against 23,224 last year, and 21,752 in 1927.

The majority of the mothers bring their babies to the Centres quite regularly and take a very keen interest in the progress and well-being of their infants. Dried milk, cod liver oil, etc., is available at all the Centres at cost price, but no mother is allowed to purchase food unless it is prescribed by the doctor and the name, amount and date written on the weight card.

#### VOLUNTARY WORKERS.

Our very best thanks are due to the ladies who assist at the Centres. They attend most regularly and are always ready to give whatever help is required. Their work is of great value to the town.

#### EXAMINATION OF TODDLERS.

It has been generally found that while children up to the age of 12 months are fairly regularly brought to the Clinics, attendances during subsequent years fall off rapidly, and comparatively few children attend between two and five years. Furthermore, School Medical Inspection records show about one out of every four children who attend the Elementary Schools is found, at the first medical examination, to be suffering from some disease or defect which requires treatment, and these defects which are preventable or curable at an early age, usually develop between the ages of two and five. The ideal remedy for this state of affairs is the provision of nursery schools, but while we may, I hope, look forward in the near future to one or more nursery schools in Smethwick, the provision of sufficient nursery schools for all such children is not a practical proposition in the immediate future. To bridge

the gap between two and five years, a scheme was put into operation last January to secure examination of these children at an intermediate age. The age chosen was four years, and as each child attains the age of four years, a note is sent to the parent inviting him or her to bring the child to the nearest Infant Welfare Clinic, for a routine medical examination. A definite appointment at a definite place is offered in each case, and the examination given is on the lines of the school medical inspection. Defects found at these inspections are followed up, and treatment offered in the same way and by the same staff as the ordinary school cases. The results of our efforts during the year are as below :—

#### INSPECTION OF TODDLERS, 1929.

				Referred for		
				Examined	Treatment	Treated
1st quarter	..	..	280	122	66	42
2nd "	..	..	265	136	52	29
3rd "	..	..	241	116	32	17
4th "	..	..	224	107	46	22
				<hr/>	<hr/>	<hr/>
				1,010	481	110
				<hr/>	<hr/>	<hr/>

#### ANTE-NATAL CLINICS.

The attendance at the Ante-Natal Clinics continue to increase in a very gratifying manner. The number of weekly sessions was increased from two to three in April, 1928, and to four in January, 1929, with the result that the numbers steadily increased throughout the year. The attendances are restricted to expectant and nursing mothers, and visits from those who should attend our ordinary Infant Welfare Centres are excluded.

Since the establishment of the first Ante-Natal Clinic in 1920, the total attendances have been as follows :—

1920	..	..	..	42	1925	..	..	..	537
1921	..	..	..	107	1926	..	..	..	1,015
1922	..	..	..	127	1927	..	..	..	1,079
1923	..	..	..	241	1928	..	..	..	1,465
1924	..	..	..	275	1929	..	..	..	2,253

The attendances during the first three months of 1930 show an even greater increase, the figures being 244 for January, 236 for February, and 322 for March. In 1929, the attendances represented 36 per cent. of all births registered in Smethwick, including babies born in the area of outside authorities, and 45 per cent. of all the births notified in the Borough.

In addition to the Ante-Natal Clinics, two Breast-Feeding Clinics were held weekly at the Council House, on Thursday and Saturday afternoon. There 559 attendances in 1929.

#### MIDWIVES.

During the year 27 midwives gave notice of their intention to practice in the area ; of these 18 were trained and 9 were bona-fide midwives.

A total of 891 births were attended solely by midwives, being 74.6 per cent. of the births notified.

Each midwife has now an ante-natal register in which she keeps a record of any ante-natal work done by herself. The majority of the midwives are endeavouring to keep this register, but say that they continue to have some difficulty in getting mothers to submit to ante-natal examination. Every midwife is urged to send as many as possible of her cases to the Ante-Natal Clinic, and she receives a written report and advice upon each case from the Medical Officer. If it is found necessary to send a midwife's case to hospital for confinement, the midwife receives a fee of one guinea as compensation for the loss of her case. The number of such fees paid during the year was 7.

It will be noted that 27 midwives attended 891 confinements, representing an average of 33 per midwife. The usual fee charged by the midwife for her services is about 30s. per case, and, therefore, the average earnings of each midwife are about £50 per annum, a totally inadequate income for a professional woman. This question is dealt with more fully in the introduction to this Report.

The number of cases in which medical aid was summoned by midwives, was 226, as against 180 the previous year. The doctor's fees were paid by the Corporation in 198 cases. Of these 198 cases, 108 were insured under the Council's scheme, by which an expectant mother on payment of 5s. before the seventh month of pregnancy, may insure against the possibility of a doctor being called in. One effect of the scheme undoubtedly has been that the midwife has been more inclined to call in medical aid in doubtful cases where she knows that it will not result in more expense to her patient. This has prevented the insurance scheme from being a financial success, but it has its compensations. The doubtful cases in the past received no medical help; under the present scheme they do, and as the whole scheme was primarily conceived to provide better midwifery and reduce maternal morbidity and mortality, and not to make a profit, I consider that the loss under the new conditions represents a really useful expenditure of money.

The increased number of cases in which medical help has been summoned is not entirely accounted for by the Insurance Scheme. Apart from the latter, the general standard of midwifery demanded to-day is higher than it was, and midwives are encouraged to call in a doctor freely in cases where previously the condition was not considered important, such as slight perineal tears, etc. The inspection of the midwives by this Department is now more complete than it has been, and the midwife is constantly being taught the importance of details which she had neglected in the past. The net result should be an all round increase in the efficiency of the midwifery service, to the great benefit of the mothers.

The complications for which medical aid was sought were as follows :—

MOTHER :—Torn perineum	..	..	..	..	50
Obstructed labour	..	..	..	..	13
Prolonged labour..	..	..	..	..	35
Breech presentation	..	..	..	..	10
Abnormal presentation	..	..	..	..	8
Placenta prævia	..	..	..	..	5
Adherent placenta	..	..	..	..	4
Miscarriage	..	..	..	..	5
Inertia	..	..	..	..	—
Hæmorrhage	..	..	..	..	14



	Vomiting	..	..	..	..	..	—
	Rise of temperature	..	..	..	..	..	7
	Eclampsia	..	..	..	..	..	—
	Other causes	..	..	..	..	..	35
CHILD :—	Feebleness	..	..	..	..	..	11
	Pemphigus	..	..	..	..	..	3
	Discharging eyes	..	..	..	..	..	7
	Premature birth	..	..	..	..	..	9
	Jaundice	..	..	..	..	..	—
	Convulsions	..	..	..	..	..	2
	Other causes	..	..	..	..	..	8
	Routine visits paid to midwives	..	..	..	..	..	96
	Number of notices received re :—						
	Intention to practice	..	..	..	..	..	27
	Sending for Medical Help	..	..	..	..	..	226
	Attendance at Stillbirths (under C.M.B. Rules)						5
	Attendance at Stillbirths (under Notification of Births Acts)	..	..	..	..	..	20
	Cessation of Breast Feeding	..	..	..	..	..	3
	Liability to be a Source of Infection	..	..	..	..	..	1
	Laying out Dead Body	..	..	..	..	..	1
	Death of Child	..	..	..	..	..	4

#### NURSING HOMES (REGISTRATION ACT, 1927.

Three Maternity Homes were registered at the beginning of the year. One was voluntarily given up early in the year, and the registration of another Home was cancelled by the Health Committee on July 11th, in consequence of certain contraventions. The remaining Maternity Home was inspected during the year and found to be generally satisfactory.

#### SUPPLY OF MILK TO EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN. (Maternity and Child Welfare Act, 1918).

The administration of the scheme was continued on the same lines as in previous years, and entailed a considerable amount of work in the Department. The number of cases dealt with shows an increase of 67 over the previous year, but the average duration of cases fell from 18 weeks to 11 weeks, and the total cost was considerably less.

Grants of milk at reduced price are made to :—

- Nursing mothers who are actually suckling their infants.
- Expectant mothers during the last two months of pregnancy.
- Children up to three years of age.
- Exceptionally to children from 3 to 5 years on the certificate of the doctor ;

in cases where the family income (after deducting the rent) falls below a certain limit.

The quantity supplied does not ordinarily exceed one pint per eligible person per day, but in exceptional cases of infants from 3 to 18 months, 1½ pints may be supplied on the certificate of the Doctor. In certain cases on

the recommendation of the Medical Officer at the Infant Welfare Centres, dried milk is supplied in lieu of fresh milk. Orders are granted for 14 days in the first instance, and applications reviewed every two weeks.

Cases receiving assistance during the year : 238.

	1929	1928
Total Cost .. .. .	£222 14s. 6d.	£334 6s. 8d.
Average Cost per case ..	18s. 8d.	£1 19s. 1d.
Average duration of case ..	11 weeks	18 weeks

### ARTIFICIAL LIGHT TREATMENT.

During the period under review, 836 individual cases received treatment at the Light Clinic, as follows :—

Tuberculosis cases .. .. .	44
Maternity and Child Welfare cases :—	
(a) Expectant and Nursing Mothers .. .. .	144
(b) Babies and Toddlers .. .. .	225
Children of School Age .. .. .	423
Total .. .. .	836

These patients made a total of 10,989 attendances during the year :—

Tuberculosis cases .. .. .	772
Maternity and Child Welfare cases :—	
(a) Expectant and Nursing Mothers .. .. .	1,309
(b) Babies and Toddlers .. .. .	2,462
Children of School Age .. .. .	6,446
Total .. .. .	10,989

The above figures compare with 1,128 cases and 17,566 attendances for the year ended 31st December, 1928, and 671 cases and 10,715 attendances for the year 1927.

The following tables show the classes of case treated together with a summary of results.

### TUBERCULOSIS CASES.

DISEASE.	Total Cases Treated	Number Discharged	Condition on Discharge.				Continuing Treatment
			Very much Improved	Improved	In Statu Quo	Course not completed	
Abdominal .. .. .	8	6	—	2	2	2	2
Bones and Joints .. .. .	5	5	1	2	2	—	—
Lupus .. .. .	6	3	3	—	—	—	3
Peripheral Glands .. .. .	15	13	3	4	1	5	2
Pre-Tubercular .. .. .	8	5	—	1	4	—	3
Other Organs .. .. .	2	2	1	—	—	1	—
Total .. .. .	44	34	8	9	9	8	10



## MATERNITY AND CHILD WELFARE CASES.

DISEASE.	Total Cases Treated	Number Discharged	Condition on Discharge.				Continuing Treatment
			Very much Improved	Improved	In Statu Quo	Course not completed	
(a) Expectant and Nursing Mothers :							
Ante-natal (normal cases)	65	62	—	45	7	10	3
Bronchitis .. .. .	1	1	—	—	—	1	—
Debility .. .. .	6	5	—	3	—	2	1
Difficulty in breast feeding	66	63	—	59	1	3	3
Nervous .. .. .	1	1	—	1	—	—	—
Post-natal .. .. .	5	5	—	2	3	—	—
Total .. .. .	144	137	—	110	11	16	7
(b) Babies and Toddlers :							
Adenitis .. .. .	11	11	—	11	—	—	—
Anæmia .. .. .	2	2	—	2	—	—	—
Bronchitis and "colds"	28	25	1	14	—	10	3
Chilblains .. .. .	2	2	—	2	—	—	—
Debility .. .. .	71	66	3	48	3	12	5
Delayed Dentition .. .. .	7	6	—	4	—	2	1
Malnutrition .. .. .	2	2	1	1	—	—	—
Nervous .. .. .	4	3	1	2	—	—	1
Not Thriving .. .. .	6	6	—	3	1	2	—
Rickets .. .. .	60	56	2	40	2	12	4
Skin .. .. .	2	2	—	2	—	—	—
Whooping Cough .. .. .	30	30	16	5	—	9	—
Total .. .. .	225	211	24	134	6	47	14

## CHILDREN OF SCHOOL AGE.

DISEASE.	Total Cases Treated	Number Discharged	Condition on Discharge.				Continuing Treatment
			Very much Improved	Improved	In Statu Quo	Course not completed	
Abdominal and Gastritis ..	2	2	—	—	1	1	—
Adenitis .. .. .	47	46	8	28	2	8	1
Alopecia .. .. .	9	8	1	3	2	2	1
Anæmia .. .. .	16	16	—	14	—	2	—
Bronchitis .. .. .	109	91	6	55	16	14	18
Chilblains .. .. .	3	2	—	2	—	—	1
Chorea .. .. .	14	14	1	10	2	1	—
Debility .. .. .	147	129	16	88	13	12	18
Fibrosis .. .. .	1	1	—	—	1	—	—
Malnutrition .. .. .	6	6	1	4	—	1	—
Nervous .. .. .	7	7	—	5	—	2	—
Pre-operation .. .. .	2	1	—	1	—	—	1
Rheumatism .. .. .	48	41	2	30	4	5	7
Rickets .. .. .	2	1	—	—	—	1	1
Skin .. .. .	2	2	—	1	—	1	—
Whooping Cough .. .. .	8	8	5	2	—	1	—
Total .. .. .	423	375	40	243	41	51	48

# REPORT OF THE CHIEF SANITARY INSPECTOR.

## SANITARY ADMINISTRATION.

I beg to submit my Report on the Sanitary Administration of the Borough for the year 1929.

In view of the fact that next year's Report will be a quinquennial "survey" Report in which the various Departments of Administration will have to be reported on in close detail, I am not proposing to make this an elaborate Report, rather allowing the statistics of sanitary work accomplished, as summarised in the tables which follow, to speak for themselves.

The standard of Sanitary Administration in the town has been well maintained, and the work of improving and renovating the poorer working class property under the powers conferred by the Housing Act, 1925, has continued. The number of houses inspected under the Housing Act was less by 300 than in the previous year, accounted for by three and a half months break in the work, due first to a change in Staff, and later to the serious illness of the Housing Inspector. On the other hand the number of houses satisfactorily repaired or re-conditioned rose by 133, from 490 houses in 1928 to 623 in 1929.

In other directions, the amount of work done has been maintained or increased. The number of complaints registered at the Office rose from 501 in 1928 to 781 in the present year, and a further 873 complaints were made to the Inspectors on the district. The defects dealt with on complaint have increased by 300 over the previous year.

It is worthy of note that the number of prosecutions under the Public Health Acts has fallen from 12 in 1928 to 9 in the present year, and under the Food and Drugs (Adulteration) Act from 5 in 1928 to 2 in 1929. It is equally satisfactory to record that in spite of the increase in the number of houses rendered fit for habitation under the Housing Act, 1925, it was only necessary for the Local Authority to do the work in default in 33 houses, as compared with 62 houses in 1928.

There have been no prosecutions for exposure of unsound food or for breaches of the Meat Regulations.

In conclusion, I wish to thank the Chairman and Members of the Health Committee for their encouragement and support throughout the year, the Medical Officer of Health for his co-operation and help at all times, and the Staff of Sanitary Inspectors and Clerks without whose loyal and devoted service, particularly in times of special stress, the maintenance of a high standard of sanitary efficiency would not have been possible.

JOHN H. WRIGHT,

*Chief Sanitary Inspector.*

## INSPECTIONS ON COMPLAINT.

The number of complaints of sanitary defects received at the Office and recorded in the Register of Complaints, was 781. In addition, a further 873 complaints were investigated, most of these being made verbally to the Inspectors on the district. The total number of dwelling houses visited for the investigation of complaints was, therefore, 1,654, and investigations revealed 2,544 defects as compared with 2,248 defects during the preceding year. Seven of these defects were in connection with water fittings, and were reported to the South Staffordshire Waterworks Company, and 5 in connection with sewers, street gullies, dangerous buildings, etc., were referred to the Borough Engineer.

These sanitary defects, which analysed in the following table, were dealt with at once by the service of Preliminary Notices on the owners or occupiers.

TABLE 1.

Dirty Premises .. .. .	312
Roofs and Eaves Gutters Defective .. .. .	340
Yard and W.C. Drains Blocked .. .. .	195
Yard Surfaces Defective .. .. .	30
Defective Sinks and Waste Pipes .. .. .	77
Accumulations of Offensive Matter .. .. .	42
Floors, etc., Defective .. .. .	133
W.C.'s without proper Flushing Arrangements .. .. .	166
Ashbins or Ashplaces Defective .. .. .	62
Midden-prives Defective .. .. .	1
Water Closets Defective .. .. .	135
Waste-Water Closets Defective .. .. .	5
Insufficient W.C. Accommodation .. .. .	3
Insufficient Lighting and Ventilation .. .. .	124
Overcrowding .. .. .	26
Animals Kept so as to be a Nuisance .. .. .	—
Water Fittings Defective .. .. .	74
Breach of Bye-Laws .. .. .	1
Dampness .. .. .	46
Insufficient Water Supply .. .. .	16
Dangerous Buildings .. .. .	7
Insufficient Drainage .. .. .	2
Defective Drainage .. .. .	27
Defective Rainwater Cisterns .. .. .	24
Defective Washboilers and Furnaces .. .. .	69
Defective Plaster of Walls and Ceilings .. .. .	285
Defective Firegrates .. .. .	60
Defective External Brickwork .. .. .	158
Defective Stairs, Handrails, etc. .. .. .	11
Smoke Nuisances .. .. .	—
Miscellaneous .. .. .	21
Defective Woodwork, Windows, Doors, etc. .. .. .	92
	<hr/>
	2,544
	<hr/>

## SUMMARY OF INSPECTIONS.

The total visits paid by the Sanitary Inspectors to the various types of premises for all purposes, are summarised below, together with the defects found. The visits numbered 14,249, and the defects dealt with numbered 10,685.

TABLE 2.

	Visits paid.	Defects found.
Housing Act, 1925 .. ..	695	7,680
Revisits—Housing Act, 1925 ..	5,459	—
On Complaint .. ..	1,654	2,562
Miscellaneous .. ..	311	—
Infectious Diseases .. ..	354	2
Slaughterhouses .. ..	305	—
Private Slaughtering .. ..	189	—
Meat and Food Shops .. ..	196	—
Meat Regulations .. ..	67	—
Dairies, Cowsheds and Milkshops	374	1
Pigsties .. ..	21	2
Factories .. ..	40	1
Workshops .. ..	63	2
Outworkers .. ..	37	—
Bakehouses .. ..	26	9
Canal Boats .. ..	32	—
Markets .. ..	89	—
Picture Houses, etc. .. ..	19	—
Rats and Mice Destruction Act..	48	—
Drains tested .. ..	24	—
Smoke Observations .. ..	21	7
Visits to work in progress ..	627	—
Re-inspections re notices served	2,349	—
Visits re refuse accommodation	563	419
Revisits .. ..	661	—
Visits to schools .. ..	6	—
Fertilisers and Feeding Stuffs ..	8	—
Offensive trades .. ..	8	—
Stables .. ..	3	—
	<hr/> 14,249 <hr/>	<hr/> 10,685 <hr/>

TABLE 3.

## SUMMARY OF THE VARIOUS DEFECTS DEALT WITH UNDER THE HOUSING ACT, PUBLIC HEALTH ACTS, AND OTHER ENACTMENTS.

Dirty Premises .. .. .	1,004
Roofs, Spouting and Eaves Gutters .. .. .	789
Yard and W.C. Drains Blocked .. .. .	196
Yard Surfaces Defective .. .. .	496
Defective Sinks and Waste Pipes .. .. .	242
Accumulations of Offensive Matter .. .. .	45
Floors Defective .. .. .	762
W.C.'s without proper flushing arrangements.. .. .	214
Ashbins or Ashplaces Defective .. .. .	696
Midden Privies Defective .. .. .	3
Water Closets Defective .. .. .	409
Waste Water Closets Defective .. .. .	15
Insufficient Lighting and Ventilation .. .. .	284
Overcrowding .. .. .	32
Animals kept so as to be a Nuisance .. .. .	2
Water Fittings Defective .. .. .	96
Smoke Nuisances .. .. .	9
Breach of Bye-Laws .. .. .	2
Houses without Sinks .. .. .	68
Insufficient Water Supply .. .. .	113
Dampness .. .. .	320
Dangerous Buildings .. .. .	19
Defective and Insufficient Drainage .. .. .	117
Insufficient W.C. Accommodation .. .. .	21
Defective Plaster of Walls and Ceilings .. .. .	946
Rainwater Cisterns Defective .. .. .	60
Washboilers Defective .. .. .	346
Firegrates .. .. .	462
Staircases and Handrails .. .. .	490
Defective Woodwork of Window, Doors, etc. .. .. .	690
Defective External Brickwork .. .. .	786
Miscellaneous .. .. .	951
	<hr/>
	10,685

TABLE 4.

## LETTERS AND NOTICES SENT OUT.

Letters .. .. .	1,146
Preliminary Notices .. .. .	1,056
Secondary Notices .. .. .	109
Statutory Notices under Public Health Acts .. .. .	239
Statutory Notices under Section 36, Public Health Act, 1875, re Ashes Accommodation .. .. .	110
Statutory Notices, Section 3, Housing Act, 1925 .. .. .	624
Preliminary Notices, Section 3, Housing Act, 1925 .. .. .	21
Cleansing Notices re Infectious Diseases .. .. .	48
Canal Boats Acts Notices .. .. .	1
Circulars .. .. .	435
Statutory Notices under Corporation Act, 1929 .. .. .	6
	<hr/>
	3,795

## SMOKE ABATEMENT.

Instances of gross atmospheric pollution from smoky factory chimney stacks are surprisingly few, taking into account the industrial character of the district. Twenty-one half-hour observations of chimney stacks have been made during the year and seven smoke nuisances recorded. It has not been found necessary to institute proceedings against offenders. During the year smoke consuming appliances have been fitted in connection with four steam raising plants in the town, including the Smethwick and Oldbury Joint Hospital, with satisfactory results.

## PROSECUTIONS UNDER THE PUBLIC HEALTH ACTS, ETC.

In nine instances owners of properties were summoned for failure to comply with Statutory Notices served under the Public Health Act, 1875, calling for the abatement of nuisances. In two cases the work was completed before the date of hearing and the Summonses were withdrawn on the payment of costs. In five cases the Magistrates consented to an adjournment, on the owner's promise to execute the Council's requirements, and at the adjourned hearings the Summonses were withdrawn on payment of costs. In the remaining two cases Orders for the execution of the work and for payment of costs were made. In one of these cases it was necessary to appeal to the Court again, owing to non-compliance with the Order, and a daily penalty was imposed until the Order was eventually obeyed. The defendant in the latter case was also convicted and fined £2 for assaulting one of the Sanitary Inspectors whilst engaged in the performance of his duties.

## RENT RESTRICTIONS (NOTICE OF INCREASE) ACT, 1923.

One application was made by a tenant for a certificate that the house was not in a reasonable state of repair, and a certificate was granted.



## Housing Statistics for the Year 1929.

TABLE 5.

Number of new houses erected during the year :—

(a) Total (including numbers given separately under (b))	678
(b) With State assistance under the Housing Acts :—	
(i) By the Local Authority .. .. .	532
(ii) By other bodies or persons .. .. .	146

NOTE. The Old Church Vicarage was demolished and re-built by the Corporation.

### I. UNFIT DWELLING HOUSES.

Inspection.

(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) .. .. .	3,290
(2) Number of dwelling houses which were inspected under the Housing Consolidated Regulations, 1925 .. .. .	695
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..	4
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation .. .. .	674

### 2. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.

Number of dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers	818
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### 3. ACTION UNDER STATUTORY POWERS.

A.—Proceedings under Section 3 of the Housing Act, 1925.

(1) Number of dwelling houses in respect of which notices were served requiring repairs .. .. .	645
(2) Number of dwelling houses which were rendered fit after service of formal notices :—	
(a) By owners .. .. .	590
(b) By Local Authority in default of owners .. .. .	33
(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close .. .. .	Nil.

B.—Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied .. .. .	397
(2) Number of dwelling houses in which defects were remedied after service of formal notices :—	
(a) By owners .. .. .	242
(b) By Local Authority in default of owners .. .. .	5

C.—Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925.

(1) Number of representations made with a view to the making of a Closing Order .. .. .	4
(2) Number of dwelling houses in respect of which Closing Orders were made .. .. .	Nil.
(3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit .. .. .	Nil.
(4) Number of dwelling houses in respect of which Demolition Orders were made .. .. .	15
(5) Number of dwelling houses demolished in pursuance of Demolition Orders .. .. .	5

N.B.—Two houses were demolished by the owners without Demolition Orders being made.

Three houses were voluntarily closed by the owners.

## Inspection and Supervision of Food.

### MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

At the close of the year the following licenses under the Milk (Special Designations) Order, 1923, were in force in the Borough :—

TABLE 6.

Eight dealer's licences to sell Grade "A" Milk.
Five Supplementary Licences to sell milk as Grade "A."
Two Supplementary licences to sell milk as Grade "A" (Tuberculin Tested).
One dealer's licence to sell milk as Pasteurised.
One dealer's licence to sell milk as "Certified."
Two dealer's licences to sell milk as Grade "A" Pasteurised.
One Supplementary licence to sell milk as Pasteurised.

TABLE 7.

### NUMBER AND CLASSIFICATION OF ANIMALS AND CARCASSES EXAMINED.

	Before Slaughter.	During Slaughter.	After Slaughter.	Total.
Oxen .. ..	46	30	206	282
Cows .. ..	2	1	2	5
Calves .. ..	2	—	7	9
Sheep .. ..	224	41	367	632
Pigs .. ..	29	40	427	496
	<u>303</u>	<u>112</u>	<u>1,009</u>	<u>1,424</u>

TABLE 8.

LIST OF ANIMALS AND ARTICLES OF FOOD WHICH WERE FOUND  
TO BE DISEASED OR UNSOUND, AND WERE EITHER SEIZED OR  
SURRENDERED, AND DESTROYED.

One Pig's Liver—Cirrhosis .. .. .	5 lbs.
Nineteen Ox Livers—Distoma Hepatica .. ..	291 „
One Head, Three Intestines, Three Stomachs of Pigs —Tuberculosis .. .. .	62 „
One Sheep's Liver—Distoma Hepatica .. ..	3 „
348 12 oz. tins Sardines—Blown and Decomposed	261 „
66 1 lb. Tins Salmon—Blown and Decomposed ..	66 „
32 ½ lb. Tins Salmon—Blown and Decomposed ..	16 „
Entire Carcase and Organs of Bullock—Tuberculosis	714 „
One Pig's Head and Intestines—Tuberculosis ..	38 „
Three Ox Livers—Abscesses .. .. .	40 „
Thirteen Pig's Heads—Tuberculosis. . . .	141 „
Four Pig's Intestines—Tuberculosis .. ..	45 „
Head, Collar, Lungs, Heart, Liver, Spleen and Intestines of Pig—Tuberculosis .. ..	50 „
Set of Cow's Lungs—Tuberculosis and Hydatid Cysts .. .. .	10 „
Greengages—Decomposed .. .. .	240 „
Eight Sheep's Livers—Flukes .. .. .	12 „
Fry, Stomach and Intestines of Pig—Tuberculosis	15 „
One Pig's Head—Abscesses .. .. .	9 „
Set Pig's Lungs—Pneumonia .. .. .	5 „
Three Shoulders Mutton—Putrefaction .. ..	14 „
Tomatoes—Unsound .. .. .	14 „
Four Ox Livers—Distona Hepatica .. ..	55 „
Frys, Three Mesenteries, two Intestines of pigs— Tuberculosis .. .. .	35 „
Two Sets Pig's Lungs—Strongylus Paradoxus ..	6 „
One Sheep's Liver—Cirrhosis .. .. .	2 „
One Leg Pork—Haemorrhagic Oedema .. ..	8 „
One Ox Liver—Tumours .. .. .	15 „
One Pig's Liver—Cloudy Swellings .. ..	5 „
	<hr/>
	2,177 lbs.

TABLE 9.

## SUMMARY OF ARTICLES OF FOOD SUBMITTED TO THE PUBLIC ANALYST, AND THE RESULTS OF THE ANALYSES.

Article Analysed.	Total Samples.	Genuine.	Not Genuine.
Milk .. ..	231	222	9
Grade "A" Milk ..	3	3	—
Sterilized Milk ..	17	16	1
Pasteurised Milk ..	1	1	—
Butter .. ..	7	7	—
Margarine .. ..	8	8	—
Seidlitz Powder ..	2	2	—
Raspberry Jam ..	1	1	—
Plum Jam .. ..	1	1	—
Lard .. ..	4	4	—
Cheese .. ..	1	1	—
Polony .. ..	2	2	—
Black Pudding ..	1	1	—
Strawberry Jam ..	1	1	—
Marmalade .. ..	1	1	—
Sausage .. ..	1	1	—
Pepper .. ..	1	1	—
Condensed Milk ..	1	1	—
Genoa Cake .. ..	2	2	—
Dundee Cake .. ..	1	1	—
Cherry Cake .. ..	2	2	—
Beer .. ..	6	6	—
Self Raising Flour ..	1	1	—
Coffee and Chicory ..	2	2	—
Tea .. ..	2	2	—
Plain Flour .. ..	1	1	—
Cocoa .. ..	2	2	—
Egg Powder .. ..	2	2	—
Mustard .. ..	2	2	—
Sugar (Moist) .. ..	1	1	—
Custard Powder .. ..	1	1	—
Tapioca .. ..	1	1	—
	<hr/> 310	<hr/> 300	<hr/> 10

TABLE 10.

PROSECUTIONS UNDER SALE OF FOOD AND DRUGS ACTS FOR  
YEAR 1929.

Date of Purchase.	Sample No.	Deficiency.	Results.	Penalty.			Costs.		
				£	s.	d.	£	s.	d.
26.2.29	5201	26.67 per cent. Fat.	Convicted..	1	0	0		15	0
27.3.29	5246	10.0 per cent. Fat.	Convicted..	1	0	0		15	0
				<hr/>			<hr/>		
				£2	0	0	£1	10	0
				<hr/>			<hr/>		

## EXAMINATIONS OF MILK FOR BACTERIAL COUNT.

During the year 103 samples of milk were submitted to the Birmingham University Public Health Laboratory for examination for bacterial count. The results of these examinations show that the milk supply of the town attains a satisfactory standard of cleanliness on the whole. The routine examination of samples is being continued throughout the year 1930, and it will be possible, when the investigations are completed, to compare the condition of samples taken during the six months' winter period with those of a six months' summer period. A detailed summary of the results will be published in a future Report.

## SMETHWICK CORPORATION ACT, 1929—SECTION 63.

An application was made to the Justices for an Order for the temporary removal to an Institution of the occupier of a front sitting-room, which was in an insanitary condition, to enable the Corporation to cleanse and disinfect the room. The Order was made for a period of fourteen days, and the man was removed to Western Road House, whilst his apartment was thoroughly repaired, disinfected and cleansed.

## FERTILISERS AND FEEDING STUFFS ACT, 1926.

Eight samples were submitted to the Agricultural Analyst, four of feeding stuffs and four of fertilisers, all of which were returned genuine.

TABLE 11.

## PUBLIC HEALTH (PRESERVATIVES IN FOOD) REGULATIONS, 1927.

Article Examined.	Total Samples.
Milk .. ..	231
Sausage .. ..	1
Polony .. ..	2
Cheese .. ..	1
Genoa Cake .. ..	2
Cherry Cake .. ..	2
Dundee Cake .. ..	1
Plum Jam .. ..	1
Condensed Milk .. ..	1
Raspberry Jam .. ..	1
Black Pudding .. ..	1
Strawberry Jam .. ..	1
Marmalade .. ..	1

TABLE 12.

129 visits were paid to Factories, Workshops, etc., and 37 to Outworkers' premises. Two notices were received from H.M. Inspector of Factories drawing attention to sanitary defects in Factories. Special visits were paid, Notices served, and the defects remedied.

# 1.—INSPECTION OF FACTORIES, WORKSHOPS & WORKPLACES.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR  
INSPECTORS OF NUISANCES.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories .. .. . (Including Factory Laundries)	40	—	—
Workshops .. .. . (Including Workshop Laundries)	89	1	—
Workplaces .. .. . (Other than Outworkers' premises)	—	—	—
TOTAL .. .. .	129	1	—



## 2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORK-PLACES.

Particulars.  (1)	Number of Defects.			Number of Prosecutions  (5)		
	Found.  (2)	Remedied  (3)	Referred to H.M. Inspector (4)			
<i>Nuisances under the Public Health Acts :—*</i>						
Want of cleanliness .. .. .	—	—	—	—		
Want of ventilation .. .. .	—	—	—	—		
Overcrowding .. .. .	—	—	—	—		
Want of drainage of floors .. ..	—	—	—	—		
Other nuisances .. .. .	—	—	—	—		
Sanitary accommodation	{	insufficient ..	I	I	—	—
		unsuitable or	—	—	—	—
		defective	—	—	—	—
		not separate for sexes	—	—	—	—
<i>Offences under the Factory and Work- shop Acts :—</i>						
Illegal occupation of underground bakehouse (s. 101) .. .. .	—	—	—	—		
Other offences .. .. .	—	—	—	—		
(Excluding offences relating to outwork and offences under the Sections men- tioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)						
TOTAL .. .. .	I	I	—	—		

\*Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

## INSPECTION OF CANAL BOATS.

During the year 32 canal boats were inspected. Only two were found to contravene the Regulations, and in both instances the defect reported was neglect to re-paint the boats. Notices were served on the owners of the boats and certificates were received showing that the requirements had been complied with.



Causes of Death at Different Periods of Life in County Borough of Smethwick.  
1929.

CAUSES OF DEATH.		Sex.	All Ages.	0	1	2	5	15	25	45	65	75
ALL CAUSES		M	607	69	22	22	12	30	83	172	121	76
		F	537	52	17	14	20	20	53	136	101	124
1	Enteric fever	M	2	..	..	1	1	..	..	..	..	..
		F	..	..	..	..	..	..	..	..	..	..
2	Small-pox	M	..	..	..	..	..	..	..	..	..	..
		F	..	..	..	..	..	..	..	..	..	..
3	Measles	M	14	1	6	5	2	..	..	..	..	..
		F	11	2	3	5	1	..	..	..	..	..
4	Scarlet fever	M	..	..	..	..	..	..	..	..	..	..
		F	..	..	..	..	..	..	..	..	..	..
5	Whooping cough	M	6	3	1	2	..	..	..	..	..	..
		F	11	3	3	3	1	..	1	..	..	..
6	Diphtheria	M	2	..	..	1	1	..	..	..	..	..
		F	..	..	..	..	..	..	..	..	..	..
7	Influenza	M	45	..	1	..	1	3	6	21	9	4
		F	32	..	3	1	1	1	3	13	5	5
8	Encephalitis lethargica	M	1	..	..	..	..	..	1	..	..	..
		F	..	..	..	..	..	..	..	..	..	..
9	Meningococcal meningitis	M	..	..	..	..	..	..	..	..	..	..
		F	..	..	..	..	..	..	..	..	..	..
10	Tuberculosis of respiratory system	M	47	..	..	1	..	8	17	19	2	..
		F	34	..	..	1	1	7	16	6	3	..
11	Other tuberculous disease	M	5	..	1	2	2	..	..	..	..	..
		F	6	2	..	..	2	..	1	1	..	..
12	Cancer, malignant disease	M	52	..	..	..	..	..	3	27	13	9
		F	53	..	..	..	..	..	4	30	10	9
13	Rheumatic fever	M	1	..	..	..	..	1	..	..	..	..
		F	2	..	..	..	..	2	..	..	..	..
14	Diabetes	M	4	..	..	..	..	..	1	2	1	..
		F	7	..	..	..	..	..	..	2	2	3
15	Cerebral hamorrhage, etc.	M	13	..	..	..	..	..	..	3	6	4
		F	31	..	..	..	..	..	1	9	12	9
16	Heart disease	M	87	..	..	..	1	..	3	26	34	23
		F	100	..	..	..	2	2	4	21	30	41
17	Arterio-sclerosis	M	21	..	..	..	..	..	1	4	9	7
		F	13	..	..	..	..	..	..	1	4	8
18	Bronchitis	M	28	2	..	..	..	..	1	8	9	8
		F	30	1	..	..	..	..	..	3	9	17
19	Pneumonia (all forms)	M	96	16	6	8	2	8	21	20	11	4
		F	55	12	7	2	1	..	5	17	8	3
20	Other respiratory diseases	M	7	..	1	..	..	1	..	4	1	..
		F	4	..	..	..	..	..	..	..	1	3
21	Ulcer of stomach or duodenum	M	5	..	..	..	..	1	2	2	..	..
		F	4	..	..	..	..	..	1	2	1	..
22	Diarrhoea, etc.	M	9	7	2	..	..	..	..	..	..	..
		F	8	5	..	..	3	..	..	..	..	..
23	Appendicitis and typhlitis	M	5	..	1	..	..	1	2	1	..	..
		F	1	..	..	..	..	1	..	..	..	..
24	Cirrhosis of liver	M	4	..	..	..	..	..	..	4	..	..
		F	2	..	..	..	1	..	1	..	..	..
25	Acute and chronic nephritis	M	18	..	..	..	..	1	3	6	6	2
		F	19	..	..	..	1	..	2	11	2	3
26	Puerperal sepsis	M	..	..	..	..	..	..	..	..	..	..
		F	3	..	..	..	..	..	3	..	..	..
27	Other accidents and diseases of pregnancy and parturition	M	..	..	..	..	..	..	..	..	..	..
		F	5	..	..	..	..	2	3	..	..	..
28	Congenital debility and mal-formation, premature birth	M	29	29	..	..	..	..	..	..	..	..
		F	20	18	..	..	1	..	1	..	..	..
29	Suicide	M	11	..	..	..	..	1	4	2	3	1
		F	3	..	..	..	..	1	..	2	..	..
30	Other deaths from violence	M	30	3	1	2	..	3	9	9	2	1
		F	12	1	..	1	2	..	2	5	..	1
31	Other forms of diseases	M	65	8	2	..	2	2	9	14	15	13
		F	71	8	1	1	3	4	5	13	14	22





